CARROLL COUNTY PUBLIC SCHOOLS

RETIREE BENEFITS GUIDE

Carroll County Public Schools 125 North Court Street Westminster, MD 21157



This guide will provide information on your benefits. Please read this guide carefully.

This is only a brief summary of the plans sponsored by Carroll County Public Schools. The formal plan documents shall determine actual benefits and plan provisions. Please refer questions to the appropriate insurance carrier or the Department of Human Resources.



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What benefits can I continue as a retiree?

Medical/Prescription Drug - You and your family may continue in the same plan offered to active employees until you or your spouse reach age 65 or obtain Medicare. At age 65 or with eligibility for Medicare due to a disability, you or your spouse will be the Traditional Medicare Plan or one of the two Medicare Advantage plans.

Dental and Vision - These coverages will terminate when you retire. You may elect to continue coverage under the Federal COBRA continuation law and pay the full premium plus a 2% administration charge for a period of up to 18 months.

Basic Life Insurance/Supplemental Life Insurance/Dependents Life Insurance - This coverage will terminate when you retire. You will be provided forms to convert any coverage in force to an individual policy with no medical underwriting if you convert the coverage within 31 days after your retirement date. The policy will be issued to you as an individual and you will be responsible for any premiums.

How will I pay my premiums?

It is recommended that medical/prescription drug premiums be deducted from your pension check each month. At the time you retire, you will be given a deduction authorization form to sign. If you are unable to deduct the premiums from your check, you will be billed by the billing company for the CCPS Department of Human Resources. Premiums for COBRA continuation or conversion of life insurance will be billed directly to you.

What happens to my spouse's coverage if I die?

Surviving spouses may continue medical/prescription drug coverage under the plan but will pay the full cost of the insurance. Premiums will be directly billed to the surviving spouse unless a monthly pension check continues under one of the pension beneficiary options

If I waive coverage at retirement, can I elect coverage later?

Yes, you may elect medical/prescription drug coverage at a later date. The cost will be based on premiums at the time coverage is elected and based on the applicable years of service you had with Carroll County Public Schools.

How is the premium for retirees calculated?

CCPS will offset the full premium rate for the medical and prescription drug plan by the monthly retiree subsidy shown below. The maximum annual subsidy is shown at the top of the rate sheet. Years of service reflect the years you worked for Carroll County Public Schools plus up to 2 years for military service. It is <u>not</u> based on the total years of service you have with the Maryland State Retirement & Pension System. Those retirees with less than 10 years of service may continue their health insurance but receive no subsidy. CCPS applies the applicable percentage to this subsidy as follows:

<10 years of service or surviving spouses	0%
10-19 years of service	50%
20-29 years of service	75%
30+ years of service	100%

The subsidy will reduce the cost for the retiree. If the spouse or dependents are covered, the retiree will pay the full cost for these dependents. If both the husband and wife are retirees of CCPS, an applicable subsidy for each person, based on their years of service, will be applied to the premium.

UNDER 65 RETIREE MEDICAL AND PRESCRIPTION DRUG PLAN



Medical and prescription drug benefits are provided through Aetna. This is the same plan offered to you as an active employee.

The Aetna Choice II® Point-of-Service (POS) plan offers two levels of benefits - Preferred and Non-Preferred. You choose the level of benefits each time you seek care.

Preferred care is obtained when you obtain care from a network provider. The Non-Preferred level of benefits is available to you if you want to self-refer to any physician of your choice. This provides a lower benefit level but still offers the freedom to choose your own provider.

The prescription drug benefits of the medical plan cover up to a 30 day supply at a network retail pharmacy and a 90 day supply at the mail order or CVS Pharmacy. You will pay \$10 for a generic prescription and \$25 for a name brand prescription. If the cost of the drug is less than the copay, you will pay only the cost of the drug. If your doctor prescribes a drug that has no generic equivalent, you must pay the higher brand name copay.

To maximize your prescription benefits, use the mail order pharmacy or CVS Pharmacy for maintenance medications. Maintenance medications are drugs that you must take on a regular, ongoing basis such as heart medication, high blood pressure medication, insulin and diabetic supplies, or other ongoing prescriptions. You can obtain a 90 day supply for one \$10 or \$25 copay as compared with three 30 day supply prescriptions at the network retail pharmacy for \$30 or \$75 in total copays. Ask your doctor if you can take advantage of this feature.

If you are taking specialty medications, these must be obtained through Aetna Specialty Pharmacy. The local pharmacy or mail order pharmacy will advise you if your medication falls into this category.

Once enrolled, you can establish an account online with Aetna at www.aetna.com to view your claims, search for participating local pharmacies and process mail order refill requests.

The POS plan benefits are outlined on the next page. The plan covers many wellness benefits such as:

- ✓ Routine Physical Exam for adults every 12 months
- ✓ Well Child Exams for children
- ✓ Routine Gynecological Exam every 12 months
- ✓ Routine Mammograms (subject to schedule)
- ✓ Routine Eye Exam every 24 months
- ✓ Routine Hearing Exam every 24 months





UNDER 65 RETIREE MEDICAL AND PRESCRIPTION DRUG PLAN



	Preferred	Non-Preferred	
	(Care provide by a network	(Care provided by a	
	provider)	non-participating provider)	
Calendar Year Deductible	None	\$250 Individual \$500 Family	
Inpatient Per Confinement	\$100	\$200	
Deductible	(waived for newborns and if	(waived for newborns and if	
	readmitted within 10 days of	readmitted within 10 days of	
	discharge)	discharge)	
Out-of-Pocket Maximum	\$1,000 Individual	\$2,000 Individual	
	\$2,000 Family	\$4,000 Family	
Out-of-Pocket Maximum inclu	ides the calendar year deductible. Once	this maximum is met, covered	
expenses are paid at 100% for	the remainder of the calendar year. (Ex	cludes copays and per confinement	
deductibles.)			
Office Visits	100% after \$10 copay	75% after deductible	
(including Mental			
Health/Substance Abuse			
Outpatient Care)			
Hospital (including Mental	90% after \$100 per	75% after deductible and \$200 per	
Health/Substance Abuse	confinement deductible	confinement deductible	
Inpatient Care)			
Other Services	90%	75%	
Prescriptions	Generic	\$10 per prescription	
_	Brand	\$25 per prescription	
	Retail Pharmacy	30 day supply	
	Mail Order Pharmacy, CVS		
	Pharmacy or Specialty Pharmacy	90 day supply	

The Aetna medical program includes many services at discounted prices for plan participants. These include discounts for:

- ✓ Vision Care
- ✓ Fitness Memberships/Equipment
- ✓ Hearing Aids
- ✓ Natural Products and Services
- ✓ Oral Health Care Products
- ✓ Weight Management Programs
- ✓ Mayo Clinic Bookstore

Information is available from Human Resources or online at www.aetna.com. You must create an account in Aetna Navigator on Aetna's website after enrollment in the plan to view the discount programs. You can use Aetna's website to view your claims, request ID cards, change your primary care physician, print temporary ID cards prior to receiving your new cards, and view the available discount programs.

MEDICARE RETIREE MEDICAL AND PRESCRIPTION DRUG PLAN



Benefits are provided through Aetna for Medicare recipients (retirees and/or spouses). CCPS offers a Medicare supplement with prescription coverage (Traditional Medicare Plan) and two Medicare Advantage Plans. You (or your spouse) will be offered these plans at the time you retire if you and/or your spouse are age 65 or eligible for Medicare due to disability. If you are not age 65, you will be offered a choice of plans on the first of the month you (or your spouse) reach age 65 (the effective date of your Medicare benefits). If you have husband/wife coverage and only one person is age 65, you will be separately enrolled under your own Social Security Numbers so that each person will receive the appropriate benefits.

The **Traditional Medicare Plan** does not use a network of providers. You may use any provider that accepts Medicare. Below is an overview of the plan:

	Traditional Medicare Plan	
Deductible	\$100 per person	
Out-of-Pocket Maximum (includes deductible)	\$700 per person	
Coinsurance	80% after deductible	
	(except 100%, deductible waived, for hospice,	
	emergency accident expenses up to \$300, preoperative	
	testing and second surgical opinions)	
Routine Physical Exam	80% after deductible, every 12 months	
Routine Gynecological Exam	80% after deductible every 12 months	
Routine Mammogram	80%, deductible waived every 12 months	
Routine Eye Exam	80% after deductible, every 24 months	
Prescriptions	Generic \$10	
	Brand \$25	
	Retail Pharmacy 30 day supply	
	Mail Order Pharmacy, CVS	
	or Specialty Pharmacy 90 day supply	

This plan will coordinate benefits with Medicare – it is a Medicare supplement. You must be enrolled in Medicare Part A (hospital) and Part B (physician). Medicare Part A is automatically provided to you at age 65 at no cost. However, Social Security may not realize you are eligible if you are not yet receiving Social Security benefits. You can enroll for Medicare without drawing Social Security Benefits. Medicare Part B requires a deduction from your Social Security check (or Social Security will bill you if you are not yet receiving monthly benefits). Aetna will assume you are enrolled in both Parts A and B when coordinating benefits. You will be offered Part D (prescription drug coverage) by insurance companies on behalf of Medicare. DO NOT ENROLL! If you enroll for Part D, you must be dropped by the CCPS prescription drug and medical coverage. Medicare does not allow you to have two Medicare approved prescription drug plans.

Medicare is always your primary medical insurance. Always give your provider both your Medicare card and your Aetna identification card. You will be enrolled in the Medicare Direct program with Aetna. This program allows all claims filed with Medicare to automatically be submitted to Aetna. This means you will not have to complete Aetna claim forms and submit them with your Medicare Explanation of Benefits.

MEDICARE RETIREE MEDICAL AND PRESCRIPTION DRUG PLAN



Medicare Advantage Plans were created by Medicare. While you still must have Parts A and B of Medicare, Medicare pays a fee to Aetna to be the only administrator of your claims. Your providers will <u>not</u> submit claims to Medicare on your behalf, only to Aetna.

The two Medicare Advantage plans offered by CCPS are PPO plans. These utilize a network of providers; however, the out-of-network benefits are paid the same as the in-network benefits. The CCPS Medicare Advantage plans are customized – unlike the plans offered to individuals in the Medicare marketplace. While the prescription drug coverage is a standard Part D plan, our plans have been enhanced to provide coverage in the coverage gap ("donut hole") for prescription drugs and offer coverage for some items not required by Medicare but covered by CCPS.

Below are highlights of the two plans offered:

	PPO Extended Service Area (ESA) CO1	PPO Extended Service Area (ESA) CO3	
Calendar Year Deductible	None	None	
Out-of-Pocket Maximum	\$1,000	\$700	
Office Visits	15%	5%	
Preventive Services	0%	0%	
every 24 months, annual mami measurement, annual prostate		diabetic eye exams, bone mass	
Inpatient Hospital (including Mental Health/Substance Abuse Inpatient Care)	\$500 copay	\$250 copay	
Outpatient Hospital Care	15%	5%	
Other Services	15%	5%	
Prescriptions	Generic Brand – Preferred Formulary	\$10 per prescription \$25 per prescription	
Up to 90 day supply at either retail pharmacy or mail order	Brand – Non-Preferred Formulary	\$25 per prescription	
pharmacy	The copay will apply during the initial coverage tier (first \$3,820 in prescriptions) and during the coverage gap (from \$3,821-\$5,100). Once the catastrophic tier is reached (\$5,101+), you will pay the lesser of 5% of the cost or the \$10/\$25 copay.		

Please refer to the detailed Aetna Medicare Advantage brochure for more information.

MEDICARE RETIREE MEDICAL AND PRESCRIPTION DRUG PLAN



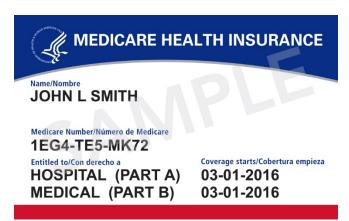
Medicare retirees and spouses may elect different plans. Once you elect a plan, you may not change plans until the open enrollment and coverage will change on January 1. Retirees and their spouses may change plans each year to meet their needs.

The Aetna Medicare medical programs also include many services at discounted prices for plan participants like the under 65 retiree plan. These include discounts for:

- ✓ Vision Care
- ✓ Fitness Memberships/Equipment
- ✓ Hearing Aids
- ✓ Natural Products and Services
- ✓ Oral Health Care Products
- ✓ Weight Management Programs
- ✓ Mayo Clinic Bookstore

Information is available from Human Resources or online at www.aetna.com. You must create an account in Aetna Navigator on Aetna's website after enrollment in the plan to view the discount programs. You can use Aetna's website to view your claims, request ID cards, print temporary ID cards prior to receiving your new cards, and view the available discount programs.

IT IS VERY IMPORTANT YOU ADVISE CCPS IF YOU, YOUR SPOUSE, OR ANY COVERED CHILDREN RECEIVE MEDICARE PRIOR TO AGE 65. AS A RETIREE, YOU AND YOUR DEPENDENTS ARE REQUIRED TO ENROLL IN MEDICARE IF ELIGIBLE.



CONTACT LISTING

	Address	Phone Number
Aetna	P.O. Box 981106	1-800-837-2386
(Medical)	El Paso, TX 79998-1106	Member Services
	Website: www.aetna.com	1-800-424-4047
		Member Services for Mental Health
Aetna	P.O. Box 417019	1-888-792-3862
(Prescription Drug)	Kansas City, MO 64179-7019	Customer Service
(Tresemption Brug)	[mail order pharmacy]	
	L w w L w wyj	1-866-782-2779
	Website: www.aetna.com	Aetna Specialty
A	D.O. D. 001104	Pharmacy
Aetna (Medicare Advantage)	P.O. Box 981106 El Paso, TX 79998-1106	1-888-267-2637
(Medicare Advantage)	El Faso, 1A 79998-1100	
	Website: www.aetnaretireeplans.com	
CIGNA	P.O. Box 188037	1-800-244-6224
(COBRA Dental)	Chattanooga, TN 34722-8037	Member Services
	Wahaita, www.aigna.com	
United Healthcare Vision	Website: www.cigna.com	1-800-638-3120
(COBRA Vision)	Claims Department P.O. Box 30978	1-000-030-3120
(CODICT VISION)	Salt Lake City, UT 84130	
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	Website: www.myuhcvision.com	110 0 10 00 00
Jasper & Company	P.O. Box 3218	410-268-3879
(Billing Company for	Annapolis, MD 21403	
COBRA Premiums and		
those retirees who do not		
have medical premiums	Email:www.JasperandCompany@aol.com	
deducted from their		
retirement checks)	Compil County Public Calacate	410.751.2074
Stephanie Rauen Employee Benefits &	Carroll County Public Schools Department of Human Resources	410-751-3074
Insurance Administrator	125 North Court Street	
1100141100 I Idillilliotiatol	Westminster, MD 21157	
	Email: abrayan@aarralll.12 arra	
	Email: shrauen@carrollk12.org	