

# RETIREE BENEFITS BULLETIN

Civil Service Commission  
State of Michigan • 2018–2019

DATE: September 2018	NUMBER: GIS 01-2018R
CONTACT:  ORS Customer Contact Center <a href="http://www.mi.gov/orsmiaccount">www.mi.gov/orsmiaccount</a>	TELEPHONE NUMBER:  800-381-5111 Toll-Free
SUBJECT:  2018–2019 RETIREE INSURANCE BULLETIN FOR DEFINED BENEFIT RETIREES	

## OCTOBER 2018 BENEFIT & INSURANCE RATES

There are currently no plan design changes to the State Health Plan PPO administered by Blue Cross Blue Shield of Michigan (BCBSM) or any HMO plans for the 2018–2019 fiscal year. Please review the rates as some premiums have changed. Premiums will be reflected in the October 2018 pension checks and can be found on the [Insurance Rates](#) section of the Employee Benefits Division website.

If you are considering changing to an HMO plan, please remember that HMO plan availability is based on location. Visit the Employee Benefits Division website at [www.mi.gov/employeebenefits](http://www.mi.gov/employeebenefits) to find the following tools to assist you with finding an HMO in your area:

- **Retirees *without* Medicare** go to the *Resources & Tools* tab and select the [Zip Code Tool](#) link from the list.
- **Retirees *with* Medicare** select *Retiree Information* from the right-hand menu then scroll down to the HMO Medicare Advantage (MA) Coverage Maps section.

## RETIREE INSURANCE INFORMATION

Basic information about retiree insurance and eligibility is available on the Office of Retirement Services (ORS) website, [www.mi.gov/ors](http://www.mi.gov/ors). To view post-retirement insurance information, select your retirement plan, *After Retirement*, and then *Your Insurance Benefits*.

# MEDICARE ELIGIBILITY AND ENROLLMENT

**Medicare eligibility impacts your State of Michigan coverage whether or not you are enrolled.** Once you or your dependent becomes Medicare eligible (generally at age 65), your State retiree health care coverage becomes your secondary insurance. If you do not enroll in Medicare Part B upon becoming eligible, your State Health Plan coverage will be treated as if Medicare coverage was in place. The State Health Plan **will not reimburse** that portion of an expense normally covered by Medicare Part B, which will result in limited or no payment. Be sure to provide your Medicare number to ORS as soon as possible to help ensure coordination of benefits. Refer to the [ORS website](#) for details on the different ways to provide your Medicare number to ORS.

If you began receiving Social Security benefits before you become Medicare eligible, you may automatically be enrolled in Medicare Part A and Part B. If you are not receiving Social Security benefits before you become Medicare eligible, you must take action if you want to enroll. You can enroll or confirm enrollment in Medicare Part A and Part B in the following ways:

- Online at [www.socialsecurity.gov](http://www.socialsecurity.gov)
- Call Social Security at 1-800-772-1213 (TTY users 1-800-325-0778), Monday–Friday, 7:00 a.m.–7:00 p.m.
- In person at your local Social Security office

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**Enrolling and Making Changes for Medicare Eligible at Age 65.** If you are *already enrolled* in state-sponsored retiree health and prescription-drug insurance and you, your spouse, or your dependent becomes eligible for Medicare at age 65:

- Be sure to enroll in both Medicare Parts A and B three months before turning 65. You will be contacted if your insurance carrier needs additional information.
- Tell ORS your Medicare number and Part A and B effective date. Doing this more than one month before the month you turn 65 will ensure no gap in coverage as you change to a Medicare compatible plan. Refer to the [ORS website](#) for details on the different ways you can get this information to ORS.

If you are *enrolling* in state-sponsored retiree health and prescription-drug insurance and you, your spouse, or your dependent is also eligible for Medicare at the time of enrollment:

- Be sure to enroll in both Medicare Parts A and B three months before enrolling in retiree insurance.
- Submit your completed online insurance enrollment at [www.mi.gov/orsmiaccount](http://www.mi.gov/orsmiaccount) (or, [Insurance Enrollment/Change Request](#) form). Coverage will begin the first day of the second month after ORS receives your request and proofs<sup>1</sup>.

**Note:** If your completed miAccount confirmation page or [Insurance Enrollment/Change Request](#) form and proofs are not received more than one month prior to your requested enrollment date, your coverage may start one month late. For example, if you submit your completed insurance enrollment request and proofs on July 5, requesting an August 1 effective date, your coverage will not begin until September 1.

**Enrolling and Making Changes for Medicare Eligible Before Age 65.** If you are *already enrolled* in state-sponsored retiree health and prescription-drug insurance and you, your spouse, or your dependent becomes eligible for Medicare before age 65:

- Be sure to enroll in both Medicare Parts A and B.
- Tell ORS your Medicare number and Part A and B effective date. Doing this will change your coverage to a Medicare compatible plan and will take effect on the first day of the second month after ORS receives your Medicare information. Refer to the [ORS website](#) for details on the different ways you can get this information to ORS.

<sup>1</sup>Explanation of proofs can be found on Page 3 of the [Insurance Enrollment/Change Request](#) form.

# INSURANCE ENROLLMENTS AND CHANGE REQUESTS

## ENROLLING AND MAKING CHANGES

If you wish to enroll in or make changes to your state-sponsored retiree health, prescription drug, dental, or vision insurance plans, go to [www.mi.gov/orsmiaccount](http://www.mi.gov/orsmiaccount) to log in to your miAccount, or use the [Insurance Enrollment/Change Request](#) form available on the ORS website at [www.mi.gov/ors](http://www.mi.gov/ors). Simply select your retirement system, go to the Forms and Publications page, and print the form. Send the completed form and required proofs<sup>1</sup> to:

Office of Retirement Services  
P.O. Box 30171  
Lansing, MI 48909

## ENROLLMENT WAITING PERIOD

As a pension recipient, you are not restricted to an open enrollment window to enroll in or make changes to your insurance plans.

Changes to enrollments or new enrollments that occur later than the month you terminate employment normally take effect the first day of the sixth month after ORS receives your enrollment form and all required proofs<sup>1</sup>.

Coverage can begin sooner when you or a dependent has an involuntary loss of other group coverage or a change in your family status (e.g., marriage, death, divorce). Be sure to send ORS your completed insurance enrollment online at [www.mi.gov/orsmiaccount](http://www.mi.gov/orsmiaccount) or an [Insurance Enrollment/Change Request](#) form, along with proof of your loss of coverage within 30 days of the event. If anyone being added has Medicare, coverage will take effect the first day of the second month after ORS receives your request and proofs<sup>1</sup>. Otherwise, coverage will take effect the first day of the month after ORS receives your request and proofs.

**Changing Plans.** To change your insurance plan, log in to [www.mi.gov/orsmiaccount](http://www.mi.gov/orsmiaccount) and click on Insurance Coverage, or complete the [Insurance Enrollment/Change Request](#) form and return it to ORS along with all required proofs<sup>1</sup>. If you are currently enrolled in any health insurance plan with the retirement system, you can change your enrollment to another plan regardless of your Medicare status. Your change in coverage will be the 1st day of the 2nd month after your request and required proofs are received. For example, if ORS receives your change request and any required proofs on January 10, your coverage with the new plan will begin on March 1.

<sup>1</sup>Explanation of proofs can be found on Page 3 of the [Insurance Enrollment/Change Request](#) form.

## STATE HEALTH PLAN PPO MEMBERS

**Durable Medical Equipment, Prosthetics and Orthotics, and Medical Supplies.** Services for you and your dependents are administered through BCBSM. To receive services without any out-of-pocket costs for non-Medicare retirees, you must use a participating BCBSM provider. If services are received from a non-participating provider, you will be responsible for 20% of the approved amount plus the difference between the charge and the BCBSM-approved amount. To receive services without any out-of-pocket costs for Medicare retirees, you must seek services from a provider that participates with Medicare.

### **Blue Cross Health & Wellness**

Blue Cross Health & Wellness is a central hub of online resources where you can learn more about how to make the most of Blue Cross's Health & Wellness services and tools. You can also call the Engagement Center at 800-775-2583 for help with any wellness questions or to be connected to the 24-Hour Nurse Line.

## VISION & DENTAL PLANS

Effective **October 1, 2018**, EyeMed will be replacing Blue Cross Blue Shield of Michigan/VSP as the administrator of the State Vision Plan. For existing enrollees in the current State Vision Plan, BCBSM/VSP coverage will end on September 30, 2018. Current enrollees in the State Vision Plan under BCBSM/VSP will be automatically transitioned to EyeMed on October 1, 2018 and there will be no gap in coverage. Benefit coverage will not be changing. EyeMed will send member cards to enrollees in September. To view In-Network Providers within your area, use EyeMed's [Provider Locator Tool](#).

There are no plan design changes to the State Retiree Dental Plan administered by Delta Dental of Michigan. Additionally, there will be no plan design changes to the State Retiree Vision Plan administered by EyeMed for the 2018–2019 fiscal year.

There are no changes to the Vision and Dental premiums for the 2018–2019 plan year.

For questions contact:

**Office of Retirement Services (ORS)**

**Toll-Free 800-381-5111**

[www.mi.gov/orsmiaccount](http://www.mi.gov/orsmiaccount)

## RETIREE PROVIDER INFORMATION

### STATE HEALTH PLAN PPO

#### STATE HEALTH PLAN PPO

BCBSM State of Michigan Service Center

800-843-4876

[www.bcbsm.com/som](http://www.bcbsm.com/som)

#### PRESCRIPTION DRUG PROGRAM

OptumRx

**Non-Medicare Retirees:** 866-633-6433

**Medicare Eligible Retirees:** 866-635-5941

[www.optumrx.com/SOM](http://www.optumrx.com/SOM)

#### MENTAL HEALTH/SUBSTANCE ABUSE SERVICES

Magellan Behavioral of Michigan

866-503-3158

[www.magellanassist.com](http://www.magellanassist.com)

#### STATE VISION PLAN

EyeMed

833-279-4355

[www.eyemedvisioncare.com](http://www.eyemedvisioncare.com)

#### STATE DENTAL PLAN

Delta Dental Plan of Michigan

800-524-0150

[www.deltadentalmi.com](http://www.deltadentalmi.com)

### HEALTH MAINTENANCE ORGANIZATIONS (HMOs)

#### BLUE CARE NETWORK (BCN)

800-662-6667

[www.bcbsm.com/som](http://www.bcbsm.com/som)

#### HEALTH ALLIANCE PLAN (HAP)

800-422-4641

[www.hap.org](http://www.hap.org)

#### PHYSICIANS HEALTH PLAN (PHP)

517-364-8500 or 800-832-9186

[www.phpmichigan.com](http://www.phpmichigan.com)

#### PRIORITY HEALTH

800-446-5674

[www.priority-health.com](http://www.priority-health.com)