



Chicago Teachers' Pension Fund

2017 HEALTH INSURANCE NON-MEDICARE FREQUENTLY ASKED QUESTIONS

Health Insurance Plans and Costs

Q: What CTPF sponsored non-Medicare health insurance plans are available in 2017 and how do costs compare?

A: Three health plans for members under age 65 will be offered in 2017. Members currently enrolled in the plans listed below do not need to take any action to stay enrolled:

- Blue Cross and Blue Shield (BCBS) PPO
- Blue Cross and Blue Shield HMO Illinois
- United Healthcare (UHC) Choice Plus PPO

Please refer to the [2017 Health Insurance Handbook](#) for the cost and benefit details of each plan. Page 5 outlines changes for 2017, plan descriptions and details can be found on pages 19-27, and are also available at www.ctpf.org/retired_members/healthbenefits.htm

Q: Will I receive a new ID card in 2017?

A: Health plan enrollees receive health insurance ID cards by mail directly from their health insurance plan. ID cards are normally issued at the time of enrollment or when a health plan change is made. If you need a replacement card, contact your health insurance plan directly. Find contact information on page 44 of the [2017 Health Insurance Handbook](#).

Q: How are the premium costs for Pension Fund Health Insurance plans determined each year?

A: Our health insurance premiums are based on the benefits offered and claims cost incurred by the plan. Premium costs are also affected by medical inflation.

Q: Will the 2017 CTPF 50% subsidy of health insurance premiums for CTPF sponsored health insurance plans change in future years?

A: CTPF Trustees voted to maintain a 50% subsidy in 2017. The subsidy is limited by state law and subject to change as directed by the Board of Trustees. The subsidy rate is set annually.

Q: If I am enrolled in non-CTPF health insurance, am I eligible for a subsidy?

A: Members enrolled in non-CTPF health insurance plans, may be eligible for a subsidy subject to the maximum reimbursement amounts published annually under CTPF's outside rebate program. In 2017, the maximum reimbursement amount will be based on CTPF's most economical Medicare or non-Medicare plan option.

Q: Why are the health insurance plan premiums for members with Medicare so much less than the plans for members under age 65?

A: When you become age 65 and enroll in Medicare Part A and Part B, Medicare becomes the primary payer of your health care costs. The plans offered by CTPF for members age 65 and over are designed to work with Medicare and help pay costs not covered by Medicare.

Q: I worked 20 years with the Chicago Public Schools (CPS) and 3 years with Teachers Retirement System (TRS). However, TRS was my final system. I'm not eligible for insurance under TRS – but CTPF tells me I am not eligible to join their plan either. Why?

A: CTPF eligibility rules state that CTPF must be your final retirement system to be eligible to join a CTPF health insurance plan. TRS rules state you must have 8 years of service to be eligible for their health insurance program, whether or not they are the last retirement system. It is very important to understand the health insurance eligibility rules for each system before you retire.

Q: I canceled my CTPF health insurance coverage last year. However, I am not happy with my new coverage and I now want to re-enroll on a CTPF health plan. Can I do that?

A: No. You can initially enroll in a CTPF plan once in a lifetime, unless you experience a qualifying event. You can initially enroll when one of the following events occurs:

- within 30 days after COBRA continuation coverage under the Board of Education or Charter School active employee group health program ends, unless coverage is canceled due to non-payment of premium
- within 30 days of the effective date of pension benefits
- during the Annual Open Enrollment Period (once in a lifetime)
- within 30 days of first becoming eligible for Medicare
- when coverage is canceled by a former group plan through no fault of your own

Since you already enrolled once, you cannot enroll again, even if you regret the decision to leave the CTPF plan. You may be able to re-enroll in a CTPF plan if you experience a qualifying event. You have 30 days after a qualifying event to join a plan, change plans, or add an eligible dependent. Qualifying events may include:

- change in permanent address that affects the availability of an HMO or Medicare Advantage plan
- marriage/civil union or divorce/dissolution
- birth, adoption, or legal guardianship
- termination of a Primary Care Physician for HMO plan enrollees
- within 30 days of first becoming eligible for Medicare

CPS COBRA

Q: My COBRA continuation coverage through my former employer expires shortly . How long do I have to get my enrollment application to CTPF to enroll in CTPF health insurance?

A: CTPF requires that you provide your insurance application no later than 30 days after the date your COBRA expires. However, we recommend you submit your enrollment application to CTPF at least one month prior to your COBRA continuation coverage expiring. If CTPF does not receive your application by that date, you would have to wait until CTPF's next Open Enrollment period, which occurs from October 1 through October 31 each year.

Q: If my CPS COBRA coverage is ending this year and I choose not to enroll in a CTPF plan at this time, can I enroll at a later date?

A: Yes, you can enroll in a CTPF health insurance plan once in a lifetime. However, you must wait for an Open Enrollment period (every October) or you can enroll within 30 days of experiencing a qualifying event, see page 11 of the [2017 Health Insurance Handbook](#).

Q: I am currently enrolled in CPS COBRA coverage – should I stay on COBRA for the full 18 months allowed?

A: Typically, you should stay on CPS COBRA coverage for the 18 months you are allowed unless you turn age 65 in the interim. Your CPS COBRA coverage is less expensive than pension fund non-Medicare health insurance coverage because active teacher premiums are less than retiree premiums. The pension fund is adding a 50% subsidy (2017 subsidy rate) of your CPS COBRA premium to your pension benefit every month.

Q: I am turning age 65 before my 18 months of CPS COBRA coverage expires. Do I need to do anything?

A: If you are turning age 65 before your 18 months of CPS COBRA expires, your COBRA coverage will end with your 65th birthday. You should enroll in Medicare Part A and Part B and decide whether to enroll in supplemental health insurance coverage through the pension fund. The pension fund will send you an invitation for an enrollment event called a Medicare Birthday party approximately three months before the month of your 65th birthday. See page 47 of the [2017 Health Insurance Handbook](#) for more information.

Dental Insurance

Q: Does the Pension Fund offer dental insurance to retiree and/or survivors?

A: No, the Pension Fund does not offer dental insurance. Dental plans are available from the Chicago Teachers Union, the Retired Teachers Association of Chicago and other organizations. Or you can purchase coverage directly from an insurance company.

Becoming Medicare Eligible

Q: I am turning age 65 in 2017. What should I do?

A: CTPF offers bimonthly Medicare “Birthday Parties” designed to help members turning age 65 evaluate their health insurance options and to enroll in Medicare. You will receive a personal invitation to this event if you or your dependent are currently covered on a CTPF health plan and are turning age 65 in 2017. You can also begin the Medicare enrollment process by visiting your local Social Security Administration (SSA) office or by going to www.Medicare.gov. We suggest you start the enrollment process three months prior to your 65th birthday. If you are already collecting SSA retirement benefits, your enrollment in Medicare is automatic. See page 47 of the [2017 Health Insurance Handbook](#) for more information.

Q: I am turning age 65 in 2017. However, I am currently covered on my spouse’s health insurance coverage through his employer. Do I have to enroll in Medicare Part A and Part B when I turn 65?

A: Individuals that are covered under a group health plan based on current employment of a spouse can delay enrollment in Medicare without a penalty. (**Note:** COBRA coverage is NOT based on current employment). Once your active group coverage ends, Medicare allows you to enroll without penalty with proof you were covered under a group plan offered through employment.

Prescription Drug Coverage

Q: Where can I find prescription benefit details?

A: Pages 26-27 of the [2017 Health Insurance Handbook](#) provide cost and benefit details for the prescription coverage associated with each CTPF-sponsored health insurance plan.

Q: Do I pay less for my prescriptions if I use the mail order 90-day supply option?

A: Yes, the mail order option will save you money. In general, you will pay less in copays for the same amount of medication by using mail order. There is also a retail 90-day supply option available with some of our plans – in general, there is some savings when you use retail 90-day supply but even greater savings when you use mail order 90-day supply.

Affordable Care Act (ACA) – Health Insurance Marketplace

Q: What is the Health Insurance Marketplace and does it affect me?

A: The Health Insurance Marketplace or “Health Insurance Exchanges” were created by the Affordable Care Act to make health insurance accessible to the 57 million people under age 65 that did not have health insurance. Those who already have health insurance coverage are not required to utilize the Health Insurance Marketplace.

Q: If I chose to enroll to dis-enroll from CTPF health insurance coverage and enroll in a Marketplace plan, can I return to a CTPF health insurance plan in the future?

A: You can only re-enroll if you experience a qualifying event. See page 11 of the [2017 Health Insurance Handbook](#) for more information.

Q: I think I may qualify for a low-income subsidy of health insurance through the Marketplace. Should I enroll in a Marketplace plan?

A: If a retiree enrolls in a Marketplace plan and qualifies for a low income subsidy, they are still only limited to an overall 50% CTPF health insurance subsidy if they were to apply for a rebate through the Outside Rebate Program (the Fund offsets the rebate payable by any subsidy of premium by any other entity, including federal government subsidy through an exchange plan). Ultimately, it is your decision how you want to proceed.
