



Chicago Teachers' Pension Fund

OPEN
ENROLLMENT
PERIOD

OCTOBER 1, 2023
THROUGH
OCTOBER 31, 2023

2024 Health Insurance

Open Enrollment Webinar

2024 Plan Year | January 1 – December 31 | All Changes Effective January 1, 2024

Plans for Medicare Eligible Members

Agenda

- New this Year!
- Enrollment and Eligibility
- 2024 Health Plan Offerings and Changes
- 2024 Premiums and Subsidies
- What Not To Do
- Questions

Your questions will be taken throughout the presentation with additional time for questions at the end. Please enter your questions in the “Q&A” section.



CTPF Update

All services including in-person, phone and video counseling are available.

- If interested, email Member Services at **memberservices@ctpf.org** and your message will be returned, or
- Call Member Services at 312.641.4464 for assistance

Send documents to CTPF electronically if possible:

- Fax to 312.641.7185 or
- Email an attachment to **imaging@ctpf.org**

We highly encourage electronic document submission. You may also mail documents. If you mail your documents, please allow for a possible delay in USPS delivery.

New This Year!

For Medicare eligible members, CTPF will be offering a new plan for members who turned age 65 on or after 1/1/2020:

- Cigna Surround Group Supplement Plan (mirrors Plan G)
-

Savings are passed onto our members!

Medicare Plan premiums decreased by 26.4% for all Medicare plans (except AARP Plan F)

Express Scripts will present a webinar this year

Vendor Fair will be held on October 12th, during vendor week October 9-13th

Medicare Health Insurance

- CTPF will offer seven plans for 2024 – three for Non-Medicare Eligible members and four for Medicare Eligible members.
-
- The 2024 Open Enrollment period takes place from October 1-31, 2023.
-
- Medicare premium changes (excluding AARP Plan F) - overall premium costs decreased by 26.4%. With health care costs increasing nationally, CTPF has been able to keep cost increases down for Medicare Eligible members, in comparison to industry benchmarks.
-
- Members currently enrolled in a CTPF plan do not need to take any action to stay enrolled.

Premium Subsidy

- CTPF helps eligible retirees and survivors pay for health insurance premiums, Medicare Part B, Part D, and Part A premiums (for members with benefit effective dates before 7/1/2016)
-
- The subsidy for 2024 will continue at 60% for our members. This does not apply to dependent coverage.
-
- Members with a pension effective date of 7/1/2016 or later are not subsidized on Medicare Part A premiums



2024 Open Enrollment

October is Open Enrollment Month

Open Enrollment runs October 1-31, 2023

- Changes effective January 1, 2024

Open Enrollment is the time to:

- Enroll for first time
- Change health plans
- Add or drop a dependent

Form 350: 2024 Health Insurance Enrollment/Change

SECTION 1: MEMBER INFORMATION

Member Name: First _____ M.I. _____ Last _____ Last 4 digits SSN/Member ID: _____

Date of Birth: (MM/DD/YYYY) ☐ Male ☐ Female Email Address: _____ Telephone Number: (with area code) _____

SECTION 2: ENROLLMENT & COVERAGE SELECTION

Enrollment: Effective Date: ____/____/____ Disenrollment: Termination Date: ____/____/____

Coverage Level: ☐ Retiree Only ☐ Retiree +1 Dependent ☐ Retiree +2 or More Dependents

Plan changes made during Open Enrollment are effective January 1 of the following year. If you enroll at a different time, call Member Services at 312.641.4464 for an effective date. If you are disenrolling, please indicate the date of termination.

Enrollment Type: ☐ Initial Enrollment ☐ Open Enrollment ☐ Special Enrollment* (Select a qualifying event below)

☐ One Time Re-Enrollment** (Proof required)

** Proof of medical and prescription coverage as of October 1* must be provided and coverage must be maintained through December 31*.

I understand that I can only enroll in one plan at a time and that a disenrollment or plan change is an election to cancel my current CTPF coverage. Requests received less than 30 days in advance may not be effective until the following month.

*For Special Enrollment, please check the applicable qualifying event:

☐ Turning 65 (eligible for Medicare) ☐ Marriage/civil union or divorce/dissolution

☐ Birth, adoption, or legal guardianship ☐ COBRA coverage period expired (end of eligibility)

☐ Cancelled by former group plan through no fault of your own ☐ Other: _____

SECTION 3: DEPENDENT INFORMATION

Indicate if you are adding, changing, or dropping a dependent and complete the required information. Dependents must enroll in the same plan as the member, unless you have a special situation (see below).

Required Documentation: If you are enrolling a spouse as a dependent, include a copy of your marriage/civil union certificate or tax return with spouse's name. If you are enrolling a child, see the Documentation Requirements in the CTPF Health Insurance Handbook at www.ctpf.org.

A	C	D	DEPENDENT NAME	SSN	BIRTHDATE (MM/DD/YYYY)	RELATIONSHIP (ENROLL/SPINOUT)	MALE/FEMALE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

Special Situations: Find more information on Couple Coverage on www.ctpf.org/health-insurance.

- If one family member is covered by Medicare and the other is not, you must enroll in corresponding plans offered by the same provider. Each enrollee completes a separate application.
- If both applicants are CTPF retirees, complete separate applications; do not enroll your spouse as a dependent.

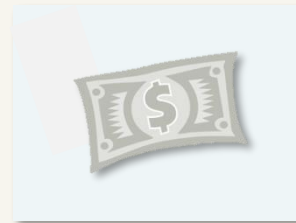
Return all enrollment forms to CTPF

Eligibility Overview

Retirees whose final retirement system is Chicago Public, Charter, or Contract Schools

Survivors of Retirees whose final retirement system was Chicago Public, Charter, or Contract Schools

Dependents include spouse, children under the age of 26, or disabled



Enrollment Requirements

- 1 CTPF Form 350 enrollment application and individual application for each plan

NOTE: UHC Medicare Advantage and Cigna Surround Group Supplement only require Form 350

- 2 Copy of Medicare card or award letter
(initial enrollment only)

- 3 Documentation requirements for dependents
(see www.ctpf.org for more detail)

- 4 Submit documents electronically: email **imaging@ctpf.org**, or fax 312.641.7185

Are you turning 65 in 2024?

Mark your calendar for these important events:

- We urge members to **attend** a CTPF Medicare Birthday Party Webinar (*by invitation*)
- **3 months** prior to your birthday month start enrollment in Medicare Part A and Part B
 - **At least 1 month** prior to your birthday month submit an enrollment application and proof of Medicare to CTPF



CTPF Plans for Members with Medicare

Medicare Advantage Plans

- United Healthcare Medicare Advantage PPO (UHCMA)
- Humana HMO

Medicare Supplement Plan

- UHC AARP Plan F (for Members who were age 65 or older by 12/31/2019)
- ***NEW*** Cigna Surround Group Supplement – mirrors Plan G (for Members who turned age 65 on or after 1/1/2020)

CTPF Plans for Members with Medicare

- Comprehensive medical and prescription drug coverage
- Guaranteed enrollment
- Prescription coverage continues through the coverage gap
- Members can change plans each year during Open Enrollment



Medicare Advantage Plans 101

Common Misconceptions

- Limited Networks
 - Limited Coverage
 - No Out-of-Network Benefits
 - Not as good as Supplement Plan
 - Not as good as Plan F
 - What's the catch?
-

CTPF Medicare Advantage Plans

- Custom designed *Group* Medicare Advantage Plans
- Must cover at a minimum what Medicare covers, and often cover more
- Retiree health is in their best interest-WIN/WIN

Humana Group Medicare HMO

- Traditional HMO with referrals required, choose a PCP and use network providers
- No deductibles
- \$10 copay – PCP; \$25 copay – specialist; preventive care covered at 100% after Medicare pays
- ER \$50 copay, waived if admitted within 24 hours
- Inpatient \$150 copay, 1st five days in-network per admission
- Chicago Metro area (*Cook, DuPage Kane, Kankakee, Kendall, Lake, McHenry & Will counties*) plus *limited* areas in *AL, AZ, CA, CO, FL, IN, KS, LA, MO, MS, NC, NM, NV, PR, TN, TX, and UT* (Please contact Humana for additional coverage areas)
- Foreign travel - emergency only

Humana Group Medicare HMO



Prescription coverage through Humana Part D Pharmacy

Prescription Drug Copayments

Retail up to 30-Day Supply	\$5 Preferred generic copay \$30 Non-preferred generic or preferred brand copay \$45 Non-preferred brand copay 25% Co-insurance for specialty drugs (limited to a 30-day supply, max \$150 per prescription)
Retail up to 90-Day Supply	\$15 Preferred generic copay \$90 Non-preferred generic or preferred brand copay <div style="border: 2px solid red; padding: 2px;">\$135 Non-preferred brand copay</div>
Mail Order up to 90-Day Supply	\$0 Preferred generic copay \$60 Non-preferred generic or preferred brand copay \$90 Non-preferred brand copay

UnitedHealthcare Medicare Advantage PPO

- \$175 Deductible, then 0% coinsurance
- Use any medical provider nationwide that accepts Medicare; **in and out-of-network benefit the same**
- ER visits \$50; Urgent Care covered at 100% after deductible
- Foreign travel – emergency benefits available
- Preventive care covered at 100% after Medicare pays
- Prescription coverage through Express Scripts Medicare (PDP) – enhanced Medicare Part D plan
- Special programs include: Renew Active enhanced fitness benefit; \$60 per quarter over-the-counter (“OTC”) benefit; Hearing aid discounts - \$1,000 allowance purchased in network every 3 years; HouseCalls Program; Renew Rewards; Personal Emergency Response System (new for 2024)

Cigna Surround Group Supplement – Mirrors Plan G

***NEW for 2024**

- This plan is **only** available to those who turned 65 years old **on or after** 1/1/2020
- Medicare Part B deductible must be paid and then the Plan pays 100% after Medicare for covered services
 - CMS sets deductible annually – 2024 has not been announced (For 2023, the Med B deductible is \$226)
- Use any medical provider nationwide that accepts Medicare
- Preventive care, urgent care and ER visits are covered at 100% after deductible
- Foreign travel - emergency available
- Program provides a \$28 a month gym membership
- Prescription coverage through Express Scripts Medicare (PDP) – enhanced Medicare Part D plan

UnitedHealthcare - AARP Plan F

- This plan is **only** available to those already 65 years old **prior** to 1/1/2020 - Premiums are based on age, gender, discounts availability and geographic area
- No deductible; Pays 100% after Medicare covered services
- Use any medical provider nationwide that accepts Medicare
 - MA, MN and WI Residents must call UHC AARP for enrollment options
- Preventive care, urgent care and ER visits are covered at 100% after Medicare pays
- Foreign travel - emergency available
- Renew Active fitness or Silver Sneakers (dependent on state)
- Prescription coverage through Express Scripts Medicare (PDP) – enhanced Medicare Part D plan

Express Scripts Prescription Drug Plan

Express Scripts is the prescription drug benefits administrator for:

- UHC Medicare Advantage PPO Plan
- Cigna Surround Group Supplement Plan (mirrors Plan G)
- AARP Medicare Supplement Plan F (UnitedHealthcare)

Enhanced Medicare Part D Plan

- Plan covers Part D drugs ONLY
- No coverage gap



Prescription Drug Plan - Overview

Preferred Value Network Pharmacy* (up to 31-Day supply)	
\$10	Generic copay
\$30	Preferred brand copay
\$50	Non-preferred brand copay
\$50	Specialty drugs
Preferred Value Network Pharmacy* (up to 90-Day Supply)	
\$25	Generic copay
\$75	Preferred brand copay
\$125	Non-preferred brand copay
\$125	Specialty drugs
Express Scripts Mail Order (up 90-Day Supply)	
\$20	Generic copay
\$60	Preferred brand copay
\$100	Non-preferred brand copay
\$100	Specialty drugs
<input type="checkbox"/>	Retail (2.5X): (\$25/\$75/\$125/\$125)
<input type="checkbox"/>	Mail Order (2X): (\$20/\$60/\$100/\$100)



***Non-preferred network copays are \$5 more than Preferred Value Network copays**

2024 Retiree Premiums



Retiree share = 40% of total cost (2024 subsidy)

Humana Group Medicare HMO with Part D Pharmacy	\$52.34
UnitedHealthcare Group Medicare Advantage PPO with Express Scripts Medicare (PDP)	\$72.17
Cigna Surround Group Supplement Plan with Express Scripts Medicare (PDP) (mirrors Plan G)	\$135.90
AARP Medicare Supplement Plan F (UnitedHealthcare) with Express Scripts Medicare (PDP)	Average by age: Age 69-71 \$160.85 Age 72-74 \$174.36 Age 75+ \$188.16

2024 Dependent Premiums

100% of total cost – No Subsidy

Humana Group Medicare HMO with Part D Pharmacy	\$130.84
UnitedHealthcare Group Medicare Advantage PPO with Express Scripts Medicare (PDP)	\$180.42
Cigna Surround Group Supplement Plan with Express Scripts Medicare (PDP) (mirrors Plan G)	\$339.73
AARP Medicare Supplement Plan F (UnitedHealthcare) with Express Scripts Medicare (PDP)	Average by age: Age 69-71 \$402.12 Age 72-74 \$435.91 Age 75+ \$470.40

Premium Payment Information

Health plan premiums:

- Deducted from monthly pension benefit

Medicare premiums:

Free Medicare Part A

- You pay full Medicare Part B premium
- CTPF subsidizes Part B premium in pension check

You pay for both Medicare Part A & Part B + enrolled in CTPF plan

- Enroll in CTPF **MedPay** (*mandatory*)
- Medicare premiums are deducted from pension check
- CTPF pays Medicare for Part A & Part B on your behalf
- CTPF subsidizes Part A (for members who retired prior to 7/1/2016) & Part B in your pension check
- *Pay your own Part D IRMAA if applicable*

Outside Rebate Program

Subsidy for Non-CTPF Plans

- Eligible retirees/survivors in non-CTPF plans and/or Medicare can apply for premium subsidy
- Maximum reimbursement based on least expensive Medicare or non-Medicare plan option
- Subsidy is payable retroactively in an annual payment – documentation required
- Subsidies paid to member by other organization is offset against CTPF subsidy.
- 2023 applications will be mailed in the spring and **due on July 31, 2024**

Have you heard this before?

No
Copays!

Teledoctors!

Hearing!

Vision!

DON'T DELAY – GET WHAT YOU DESERVE

Free Rides
To the Doctor!

Dental
Coverage!

Have You Ever Seen These Commercials Urging You to Call Now?



Medicare Open Enrollment: October 15 – December 7, 2023

Don't Make Costly Mistakes

There are some *common mistakes* members make which **will** result in a **loss of your current CTPF health insurance coverage**:

1) Failing to make timely Medicare Part B (including IRMAA B) and/or Medicare Part D IRMAA payments

OR

2) Enrolling in an additional **outside** health insurance plan and/or prescription drug plan

Please take whatever steps necessary to avoid making any of these mistakes.

Don't Make a Costly Mistake CONTINUED

Part B Payments: You must pay your Medicare Part B (with or without IRMAA B) payments directly to Medicare, and receive a monthly or quarterly bill unless you:

- receive a Social Security benefit,
- *participate in CTPF's MedPay program (for Part B or IRMAA B), or*
- sign up for Medicare's Easy Pay program.

If you **fail** to pay your Medicare Part B bill promptly, you will be **disenrolled by Medicare** and **lose** your CTPF Health Insurance coverage. Reinstatement is very difficult and may result in additional penalties.

Recommendation: Setup autopay on Medicare.gov for your Part B (and IRMAA B and/or IRMAA D) payment(s) so you never have to worry again.

Don't Make a Costly Mistake *CONTINUED*

Part D IRMAA Payments: You pay your Medicare Part D IRMAA payments similar to how Part B is paid except CTPF does not pay Medicare Part D IRMAA via CTPF's MedPay

- Due to government regulations, CTPF is **not** allowed to pay Medicare Part D IRMAA even if enrolled in CTPF's MedPay program

If you **fail** to pay your Medicare Part D IRMAA bill promptly, you will be **disenrolled by Medicare** and **lose** your CTPF Health Insurance coverage. Reinstatement is very difficult and may result in additional penalties.

Recommendation: Setup autopay on Medicare.gov for your Part B (and IRMAA B and/or IRMAA D) payment(s) so you never have to worry again

Don't Make a Costly Mistake CONTINUED

Enrolling in an Outside Plan or an Additional Plan:

If you have CTPF Health Insurance **and** enroll in an additional **outside** plan, you will be **disenrolled by Medicare** and you will be **disenrolled by Medicare** in your CTPF Health Insurance coverage. Reinstatement is very difficult and may result in additional penalties.

If you actively disenrolled and later decide that you are unhappy with a non-CTPF plan and want to rejoin a CTPF plan, you **must** wait until the next Open Enrollment period (October 2024), unless you have a qualifying event.

Recommendation: Be cautious when speaking to a broker or infomercial advisor regarding your insurance plan, this **will** have an impact on your CTPF coverage.

Don't Make Costly Mistakes

What is the difference between CTPF's Open Enrollment and Medicare Open Enrollment?

- **CTPF's** Open Enrollment is October 1 through October 31, 2023
 - **Medicare's** Open Enrollment starts October 15 and runs through December 7, 2023
-

CTPF Members currently enrolled in a CTPF health insurance plan should NOT take part in Medicare's Open Enrollment

What should you do during Medicare's Open Enrollment?
NOTHING

What Is CTPF Doing?

- ✓ We want our members to keep their CTPF health insurance plan if they desire. Our plans offer substantial benefits at a reduced premium with a subsidy applied to offset the cost.
- ✓ Unfortunately, during the last quarter of the year, CTPF is notified of hundreds of disenrollment's.
- ✓ The Health Insurance Department makes every effort to contact every member who enrolled in an outside health insurance plan to confirm that it was your intention to disenroll from CTPF's Medicare health insurance plan.
- ✓ We also follow up with a letter notifying the member of their disenrollment from the CTPF health insurance plan.

What Is CTPF Doing? *CONTINUED*

If you think you may have been enrolled in an outside plan when that was not your intention, please call Member Services at 312.641.4464 to request our assistance in reviewing your account.

- Often, CMS (Medicare) cancels coverage before CTPF is even notified
 - If dropped for non-payment of Medicare Part D IRMAA, you must call CMS to request a "good cause reinstatement" with no break in service. If CMS determines you meet the criteria for reinstatement, they will open a CTM case to get you reinstated. Until this CTM is created, unfortunately there is nothing CTPF can do.
- If you are enrolled in CTPF's UHC Medicare Advantage, Cigna Surround Group Supplement or AARP Plan F, CTPF's Health Insurance Department can review your account via Express Scripts' online access to determine if you were disenrolled from CTPF's health insurance plans.

Health Insurance Digital Access – Mobile Apps and Websites



Access your mobile device's app store (*App Store for iPhone/iPad, Google Play for Android*) to search for the following apps:

- **MyHumana & Humana Pharmacy:** Humana Medicare Advantage HMO plan
- **Express Scripts Mobile App:** Express Scripts
- **Cigna Mobile App:** myCigna

For **UnitedHealthcare Medicare Advantage PPO**, use website:
Retiree.UHC.com/ctpf

For **AARP UHC Plan F**, use website:
www.medicare.uhc.com

Health Insurance Check-up

Do the math and consider:

- 1) Your medical needs
- 2) Yearly premium costs
- 3) Annual deductible, coinsurance, and Rx copayments
- 4) Choice of network providers



Dental & Vision Coverage

CTPF does not offer dental or vision insurance

Dental and Vision plans may be available through:

- Retired Teachers Association of Chicago (RTAC)
- Independent purchase



*Contact information on page 23 of the CTPF
Medicare Health Insurance Handbook*

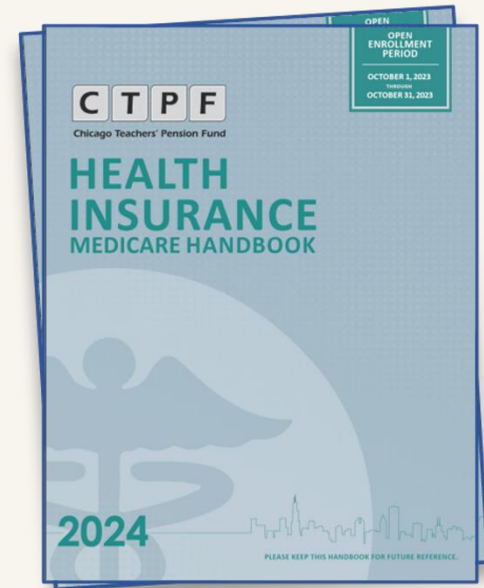
Important Reminders

1. Return completed enrollment forms to **CTPF**, not to your insurance carriers.
2. Keep CTPF informed of any address, email or phone number changes.
3. CTPF does not send junk mail! Always read and take action, if necessary.



Important Reminders CONTINUED

1. You must notify the Social Security Administration (SSA) of address changes – even if you do not receive SSA benefits
 - Social Security Offices have phone and online services
 - If unable to process enrollment online, contact your local Social Security office
2. Open Enrollment occurs every October.
3. Review the Medicare Handbook for benefit changes. It is both mailed and posted to www.ctpf.org.



Important Reminders CONTINUED



Register for *myCTPF* | CTPF members who complete the one-time registration process can use *myCTPF* to securely access and download a 1099-R, pay advice(s) and view address/contact information on file with CTPF. Access the system from a “button” at ctpf.org, and use your CTPF Member ID to register. Pensioners can find their ID on a pay advice.

Stay up-to-date on changes by having your email on file at CTPF



- Contact Member Services to update your email address: email memberservices@ctpf.org, submit documents to imaging@ctpf.org or via fax at 312.641.7185 , or call 312.641.4464



- Register for email updates at ctpf.org
Scroll down to bottom and enter your email address

Follow Us



Sign Up for Email Updates

Email Address: *



Important Reminders:

Open Enrollment Vendor Education Week

Our vendor partners will offer webinars to provide additional information and support to members. Sessions will take place the **week of October 9th**. Register at ctpf.org/calendar.

NEW THIS YEAR!

Express Scripts will be offering a webinar this year.

NEW THIS YEAR!

Vendor Fair on October 12th:

- Registration is **REQUIRED** to attend. Call Member Services at 312.641.4464 to register for a time slot.
- Members must provide proof of COVID-19 vaccination and complete a health screening form before entering. Members will only be admitted during the time they are registered.

Contact Information

MEDICARE ELIGIBLE HEALTH INSURANCE PLANS		
	GROUP NUMBER	PHONE NUMBERS
UnitedHealthcare Group Medicare Advantage PPO with Express Scripts Medicare® (PDP) for CTPF UHCRetiree.com/ctpf www.Express-Scripts.com/medd/ctpf	UnitedHealthcare 12830 Express Scripts CTPFRX	1-866-572-9396 Customer Service 1-800-453-8440 Behavioral Health 1-877-365-7949 NurseLine 1-800-864-1416 1-800-716-3231 TTY/TDD
AARP® Medicare Supplement Insurance Plan F (UnitedHealthcare) with Express Scripts Medicare® (PDP) for CTPF www.medicare.uhc.com www.Express-Scripts.com/medd/ctpf	UnitedHealthcare 1089 Express Scripts CTPFRX	1-800-392-7537 Customer Service 1-888-543-5630 NurseLine 1-800-864-1416 1-800-716-3231 TTY/TDD
Humana Group Medicare HMO with Part D Pharmacy www.humana.com	Humana 303611	1-866-396-8810 Customer Service
Cigna Surround Group Supplement Plan (Mirrors Plan G) with Express Scripts Medicare® (PDP) for CTPF www.myCigna.com www.Express-Scripts.com/medd/ctpf	Cigna 3345704 Express Scripts CTPFRX	1-800-244-6224 Customer Service 1-866-576-8773 NurseLine/Health Information Line 1-800-864-1416 1-800-716-3231 TTY/TDD

See page 23 of your Health Insurance Handbook.

Office/Mailing Information:

Chicago Teachers' Pension Fund
ATTN: Health Benefits Dept.
425 S. Financial Place | Suite 1400
Chicago, Illinois 60605-1000
312.641.4464 *main*
312.641.7185 *fax*



PLANS FOR MEDICARE ELIGIBLE MEMBERS

**YOUR VOICE
MATTERS**



Please take our five-minute
survey and share your thoughts
on this webinar at
ctpf.org/2024survey.