

Pre-Medicare Checklist



Open enrollment begins November 1 for Ohio Police & Fire Pension Fund's (OP&F) pre-65 members and dependents. Important changes were made in 2020 that continue each year, including the opportunity to enroll in an expanded number of qualified plans from the ACA marketplace, a local broker, or Alight Retiree Health Solutions' enrollment partner, eHealth.

To help members optimize their OP&F stipend and healthcare choices, Alight and OP&F prepared a checklist to provide additional support as you are considering your options.

When shopping for coverage

- Have the names of your doctors with you when reviewing the networks covered by each plan.
- Know which hospitals or facilities you want to have in your plan's network and take a fresh look at your healthcare needs for the year ahead.
- Confirm with your doctor's office that they will accept the plan you want to enroll in or are enrolled in. Be as specific about the plan as possible. Provide your doctor's office with the carrier, plan name and plan ID.
- Review premiums carefully as rates can change from one year to the next. If your premium changes, you can adjust your monthly premium reimbursement by logging into the member's Alight account and clicking on the HRA tab. Click on "Manage My Ohio Police & Fire Pension Fund HRA" to get to YSA's website to fill out the new premium reimbursement form.
- If you have not enrolled and experience a Qualified Life Event, you will need to fill out the OP&F Health Care Stipend Eligibility form (available at www.op-f.org/retiredmembers/memberforms#HealthCareForms).

When shopping for plans through healthcare.gov

- The premium you see on healthcare.gov may already be reduced based on the premium tax credits available to you. This may mean that a premium you see on other sites, including eHealth, may not be the same as healthcare.gov.
- Remember you are not able to accept both the premium tax credits and the OP&F stipend. You will need to choose one or the other.

When shopping for plans through a local agent

- Ask the agent if the plan you are considering is “ACA-approved.” In order to use your OP&F stipend the plan must be a “Qualified Health Plan” meaning it is Affordable Care Act approved and covers 10 essential benefits, including:
 - Preventive and wellness visits, including chronic disease management
 - Maternity and newborn care
 - Mental and behavioral health treatment
 - Services and devices to help people with injuries, disabilities, or chronic conditions
 - Lab tests
 - Pediatric care
 - Prescription drugs
 - Outpatient care
 - Emergency Room services
 - Hospitalization

Important reminders

- Be sure you do not have pop-up blockers enabled on your internet browser. This may prevent you from linking over to eHealth from Alight’s site.
- The first month’s premium **will be deducted from your bank account** once an application for a new plan is submitted. This will be in addition to that month’s premium payment for your current plan if applicable.
- If you enroll in a new Qualified Health Plan, **DO NOT** cancel your existing plan until the new plan is approved. Once the new plan is approved, you are responsible for contacting the former carrier and cancelling the old plan.

