

What Pre-Medicare retirees need to know

Q. Why is OP&F changing our current healthcare coverage?

A. Funding for the retiree healthcare plan at OP&F is limited, making the group healthcare plan sponsored for several years no longer an option. OP&F has investigated and considered a wide variety of options to extend the funding for retiree healthcare. That work has resulted in a stipend-based model that should keep healthcare funding solvent for at least 15 years. Of course, we will continue to monitor and make choices going forward that are in the best interests of our entire membership.

Q. What are the advantages of an Individual & Family plan vs. a retiree healthcare plan?

A. An Individual & Family plan could have several benefits:

- you cannot be denied coverage
- you are automatically covered for a set of essential health benefits
- you can choose a plan that best fits your family's needs, including the network of providers and level of coverage
- you may pay less
- you may be eligible to get help paying your plan's premiums

Q. Is there a penalty if I don't have coverage?

A. No. As of 2019, you no longer have to pay a penalty if you choose to go without coverage. However, there are many reasons to have coverage, most importantly to protect your health and your finances. Unexpected accidents or health issues can add up to hundreds of thousands of dollars if you have no protection. In addition, you will not receive your stipend from OP&F if you do not enroll in a qualified plan.

Q. I'm retiring, how do I learn more about my options?

A. OP&F has partnered with Alight Retiree Health Solutions (Alight) to support you and your family members as you transition to the individual Marketplace. Through Alight and their enrollment partner, eHealth, you will have access to online tools as well as licensed insurance agents. These services are available to you at no additional cost. You will only pay the cost of the plans you choose. You will receive a personalized letter with details, an introduction to Alight, and the benefits of selecting and enrolling in coverage through Alight and their enrollment partner, eHealth. You will also learn more about the Affordable Care Act (ACA), health plan coverage levels, how to choose the right plan, enrollment process and timelines.

A custom website will provide you with information about the plans available to you, essential benefits, tax credits, and how to prepare for enrollment. You will find answers to common questions and educational videos online as well.

- You will receive details about how to log on to Alight's website, your personal Alight ID to access your secure account, a checklist of action items and key dates, as well as an overview of coverage options available to you.
- You will want to verify your account online and complete your profile. Be sure to check names, addresses and date of birth for all family members as these items have an impact on the plans that may be available to you. Gather information that will be helpful when comparing and selecting a plan including preferred doctors and hospitals.

Frequently asked questions



Q. Why should I trust Alight Retiree Health Solutions?

A. Alight is a leading national private exchange, working in partnership with eHealth, the nation's leading online source of health insurance¹, to provide you access to a wide range of Marketplace insurance plans.

¹ehealthinsurance.com/about-ehealth/our-story

Q. What services are available through Alight that I cannot get by enrolling someplace else?

A. Enrolling through Alight gives you several value-added services including:

- Access to licensed insurance agents through Alight's enrollment partner, eHealth, who have knowledge of all your health plan choices. This service does not cost you anything. You only pay for the plans you enroll in.
- Advocacy services that provide help with billing procedures, claims and appeals, benefit issues and access-to-care problems.

Q. Do I have to pay licensed agents for helping me?

A. No. You only pay the cost of the plans/coverage you select. If you consult with a licensed agent, you can be assured that they will offer objective advice to help you make the choice that's right for you.

Q. How do I log in to my account?

A. Look for your personal Alight ID on the letter you received, or call Alight at 1-844-290-3674 (TTY), Monday – Friday, 8 a.m. – 8 p.m. CT.

- Go to retiree.alight.com/OP-F
- Log in with your Alight ID
- Verify your information: doctors, hospitals, specialists and other providers, as well as the medications you take

Keep in mind, a licensed agent is an excellent resource and will take as much time with you as you need to feel comfortable with your plan selection.

Q. Can I see every policy available in my area?

A. No. Alight and eHealth follow stringent guidelines about the insurance companies that participate in its exchange by carefully selecting companies and products based on the insurers' financial ratings, premium stability, member service levels, costs and benefits.

In some cases, certain insurance companies may not be listed because they currently chose not to offer their plans through an exchange.

Q. Do all qualified plan policies have guaranteed issue?

A. Yes. The ACA does not allow individuals to be denied coverage for any pre-existing conditions.

Q. Does OP&F choose the insurance coverage options offered through Alight?

A. No. As an exchange, Alight and eHealth provide access to plans from regional and national insurance companies so you may have several options to choose from.

Q. Is there a deadline for choosing new coverage each year?

A. Yes. The enrollment deadline is Dec. 15 to have benefits on Jan. 1 and avoid a lapse in coverage.

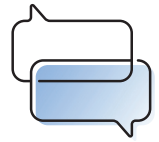
Q. I'm retiring. When does my new coverage begin?

A. It is important to enroll as soon as possible so you do not go without insurance coverage. You will need to select and enroll in a plan no later than the 15th of the month for coverage to be effective on the 1st of the following month.

Q. Can Alight help me find coverage for a Medicare-eligible dependent under the age of 65?

A. Yes. Through Alight, these services are at no additional cost to you. You only pay the insurance premium for the plans you choose.

Frequently asked questions



Q. Is it possible that a local insurance broker can get me a better rate than what I can buy through Alight/eHealth for the same plan?

A. No. By law, the price you pay to purchase the same policy from the same insurer will not differ, regardless of where you purchase it. Alight cannot add a surcharge to any premium.

Though the same policies from the same insurance company will have the same price regardless of where or how you enroll, in some cases, the policy that a local agent or broker offers, while similar, may differ. There may be value-added services and features that could affect the premium, so it is important to carefully review plan details.

Q. How do I pay the premiums for the plans I enroll in?

A. You will be responsible for paying premiums directly to your new insurance company. So that you don't miss a payment and risk losing coverage, we recommend that you take advantage of automatic payment features, like direct debit, through your new insurer.

Q. When do I pay for my coverage?

A. Once you pay the premium required when you initially enroll in coverage, you will then pay your premiums monthly or as invoiced by your insurance company.

Q. Is there financial assistance to help pay for coverage?

A. Yes. Based on your income, you may qualify for a federal tax credit. You can use the coverage calculator online.

Each year, OP&F intends to provide a stipend that you can use to reimburse yourself for qualifying expenses. Keep in mind that you cannot take advantage of both a tax credit and the OP&F stipend. If you take the tax credit, you will forfeit your OP&F stipend.

Premiums: You may use your stipend to pay for your health, prescription drug, dental and vision insurance premiums.

Out-of-pocket expenses: You may also use your stipend to pay for eligible expenses such as copays, deductibles and other health related services, up to the amount in your account.

To qualify for the OP&F stipend contribution, you will need to enroll in an Individual & Family plan through Alight's enrollment partner, eHealth, healthcare.gov, or a local broker.

If you and an eligible dependent enroll in a qualified plan, the contribution amount will be increased. If you enroll after January, contributions will be prorated. Should you or your eligible dependent turn 65 and become eligible for Medicare mid-year, your stipend will change and will again be prorated at that time.

OP&F also sponsors a Low Income Stipend Increase Program for individuals or families who qualify. For more information on this program, please contact OP&F.

Q. Where can I go with questions?

A. You will find detailed answers to most questions about the ACA, your plan options, benefit overviews, tax credits, enrollment and more, online at retiree.alight.com/OP-F, or by calling Alight at 844-290-3674 (TTY) Monday – Friday, 8 a.m. – 8 p.m. CT.

Q. What do I do if I have an issue with my new plan after enrolling?

A. You are entitled to ongoing support from Alight if you enroll in your plan through Alight and eHealth. First, however, to get answers to basic questions about your plan, consult your plan provider directly. More complex issues involving claims, billing procedures, appeals, or difficulty getting appointments with specialists can be directed to Alight at no additional cost to you.