

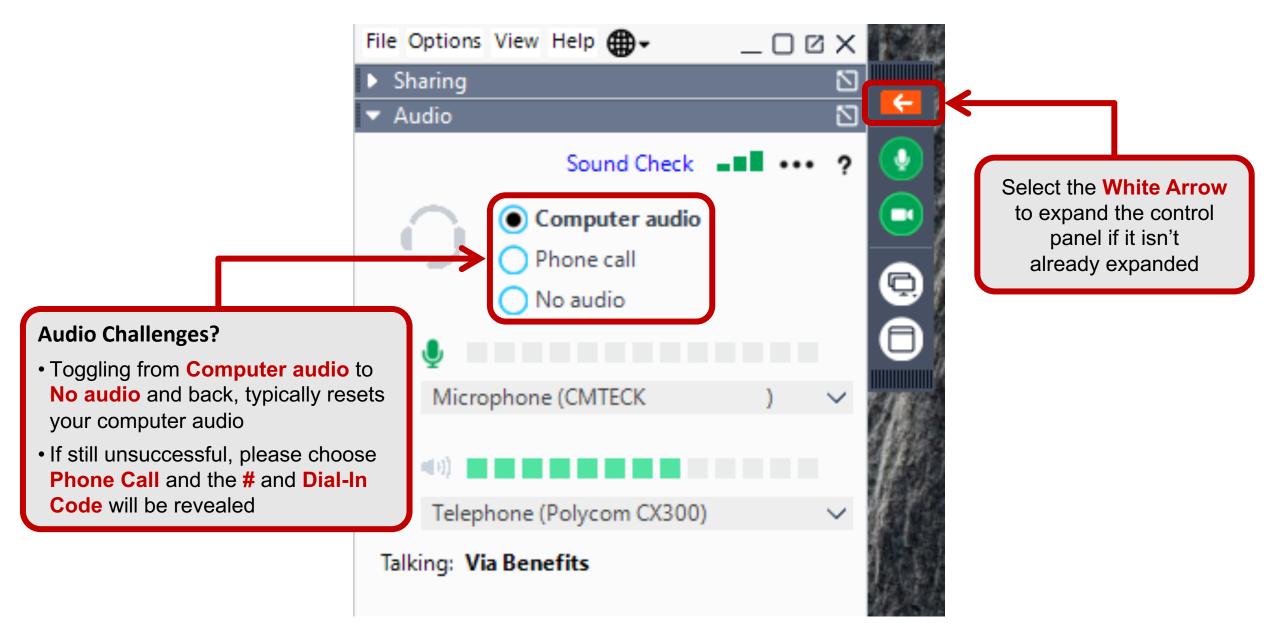




We won't be stopping for any questions during the presentation; but you'll find that we will address most of your questions directly in the presentation.

All individual situation questions should be called into the Via Benefits Service Center.





Today's Presentation is Available Ongoing

Here's the new look of our website:

my.viabenefits.com/ACERA

As you scroll down this Welcome page you'll see the link for this live webcast recording.

Give us some days to process this live webcast but you'll eventually be able to watch and re-watch as often as you'd like.





Planning for Your Future Health Benefits



Here is what we'll cover:

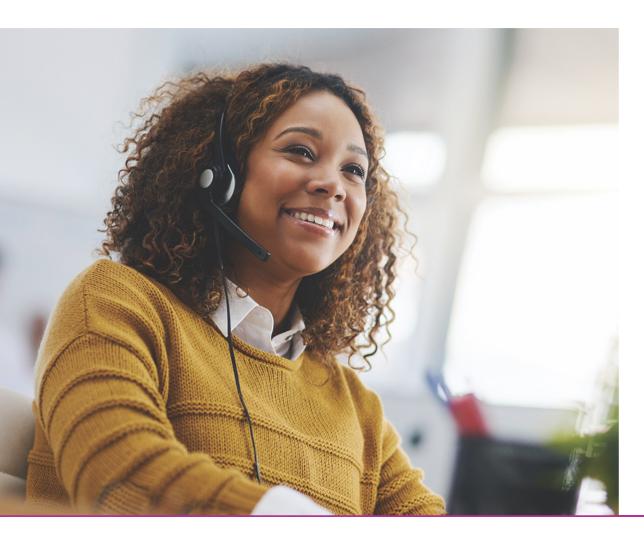
- Introducing Via Benefits
- Medicare Education
- The Enrollment Process
- ACERA HRA Funding
- Next Steps
- Q&A



Introducing Via Benefits



Via Benefits Care Team



Our Care Team is objective, unbiased and based in the United States

Call or schedule an appointment through our website

Medicare

1-888-427-8730 (TTY:711) my.viabenefits.com/ACERA Available 24/7

Pre-65

Marketplace.viabenefits.com/ACERA

1-844-353-0770

Monday – Friday from 5:00 am – 4:00 pm Pacific

Online Available 24/7



Via Benefits Individual Marketplace — How It Works

ACERA provides access to Via Benefits

Individual Medicare Marketplace

- Offers access to individual plans
- Provides comprehensive communications
- Helps participant and spouse find the right plan
- Provides lifetime advocacy for retirees

Participants can select plans that work with their health and financial needs





How We Help



Consultative Process

Simplified Selection





Effortless Enrollment

Ongoing Advocacy







Your Future Coverage — How Medicare Coverage Works



Original Medicare (Parts A & B)



Medicare Advantage with Prescription Drug (Part C)



Medicare Supplement (Medigap)





Medicare Advantage with Prescription Drug [MAPD] Plans

Subsidized by CMS

All-in-One bundled benefits



Takes Over Provisioning of Care

Just use MAPD member ID card

HMO – Health Maintenance Organization

- In-network only
- Must choose primary care physician
- Referral needed to see a specialist

PPO – Preferred Provider Organization

- In- or out-of-network coverage
- Don't need to choose primary care physician
- No referral needed to see specialist



Medicare Supplement Insurance (Medigap)

Single-Lettered Plans in 47 States (different in MA / MN / WI)

	Medicare Supplement Insurance (Medigap) Policies							
Benefits	Α	В	D	G	K	L	M	N
Medicare Part A coinsurance and hospital costs	100%	100%	100%	100%	100%	100%	100%	100%
Medicare Part B coinsurance or copayment	100%	100%	100%	100%	50%	75%	100%	100%
Blood (first 3 pints)	100%	100%	100%	100%	50%	75%	100%	100%
Part A hospice care coinsurance or copayment	100%	100%	100%	100%	50%	75%	100%	100%
Skilled nursing facility care coinsurance			100%	100%	50%	75%	100%	100%
Part A deductible		100%	100%	100%	50%	75%	50%	100%
Part B deductible								
Part B excess charges*				100%				
Foreign travel emergency (up to plan limits)			80%	80%			80%	80%

Medicare-Eligible Before 2020 ONLY				
С	F			
100%	100%			
100%	100%			
100%	100%			
100%	100%			
100%	100%			
100%	100%			
100%	100%			
	100%			
80%	80%			

Source: CMS

* No Excess Charges States

- CT, MA, MN, NY, OH, PA, RI, VT.

Out-of-Pocket Limit in 2023

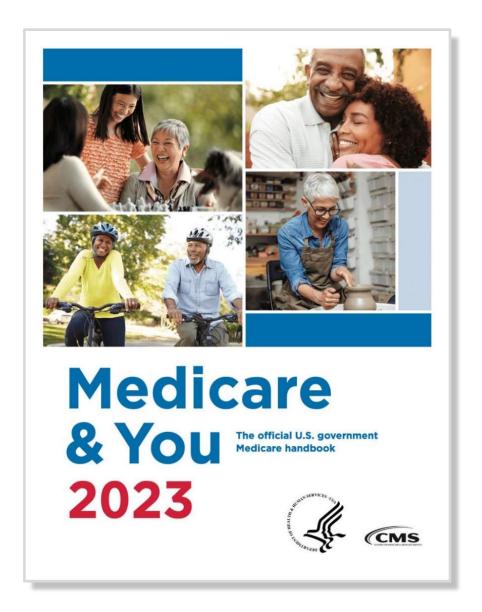
\$6,940 | \$3,470



CMS Medicare Handbook

- Annually Updated
- Medigap Section
- National

Just choose the lowest premium for the Medigap letter plan that meets your needs





Let's Look at Some Scenarios





- Healthy, not many doctor visits
- Routine care in one geographic area only
- Pay copay or coinsurance



- Many doctor/specialist visits
- Routine care anywhere in the USA that accepts Medicare
- Pay up front higher premium



Prescription Drugs — 5 Tiers of Copays



- Tier 1 Preferred Generic
- Tier 2 Non-Preferred Generic
- Tier 3 Preferred Brand
- Tier 4 Non-Preferred Brand
- Tier 5 Specialty Drugs



Medicare Prescription Drug Coverage 2024

Phases	Deductible	Initial Coverage	Coverage Gap (only 25% will reach)	Catastrophic Coverage (only 4% will reach)	
Participant Pays	Full retail until deductible is met	Copays for your plan coverage (25%)	25% for Brand Name 25% for Generics	5% co-insurance & copays eliminated	
Your Total Cost	\$0 – \$545	\$5,030	\$8,000	N/A	

2024

5% co-insurance & copays eliminated for those who reach the Catastrophic Coverage Phase



Your Future Coverage — All Medicare plan types available

PLANS

Medicare Advantage
With Prescription Drug (part C)

Medicare Supplement (Medigap)

Prescription Drugs (Part D)

INSURERS





















Top Frequently Asked Medicare Questions

1. Will I be asked pre-existing medical condition questions?

Not if your group plan is ending or you are newly eligible for Medicare. ACERA has activated a Special Enrollment Period (SEP) whereby you are guaranteed issue (GI) for any medical plan – Medicare Advantage or Medigap; no pre-existing medical condition questions.

2. I thought that there was going to be a cap on prescription drug expenses?

The Inflation Reduction Act is what you may be referring to. It's important to remember that the Inflation Reduction Act is modular – different provisions activate in different years. In 2024, the Catastrophic Coverage phase copays go away (if you reach that level), and then in 2025, there is indeed a \$2K cap on all Medicare prescription drug OOP expenses.

3. Do I need to have Part B if I select Medicare Advantage or Medigap?

Yes, you must continue to have effective dates for both Original Medicare Part A and Part B, in order to be considered for either Medicare Advantage or Medigap supplemental Medicare insurance.

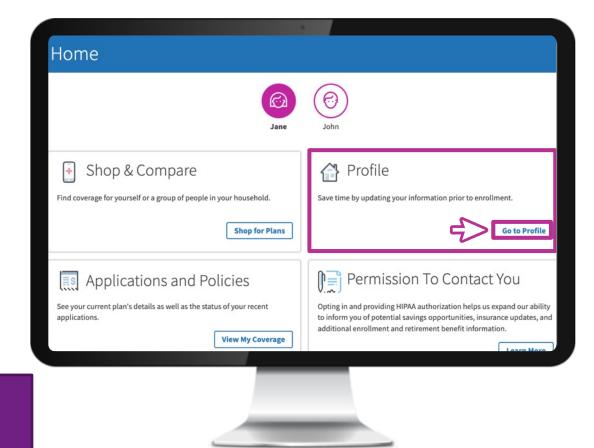






Pre-Enrollment — Create a Via Benefits Profile

- Select Go to Profile
- Enter your personal and health information



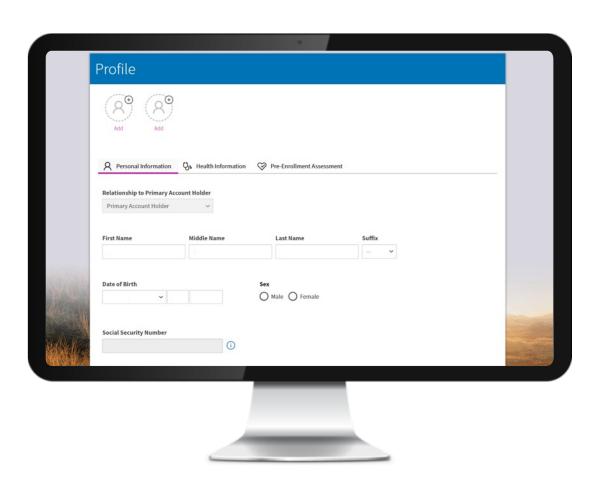


For step-by-step instructions, watch our video Create a Via Benefits Profile" at my.viabenefits.com/ACERA



Pre-Enrollment — Personal and Health Information

- Enter personal information for yourself and any other persons on your account.
- Enter your doctors information, prescriptions and pharmacy preference

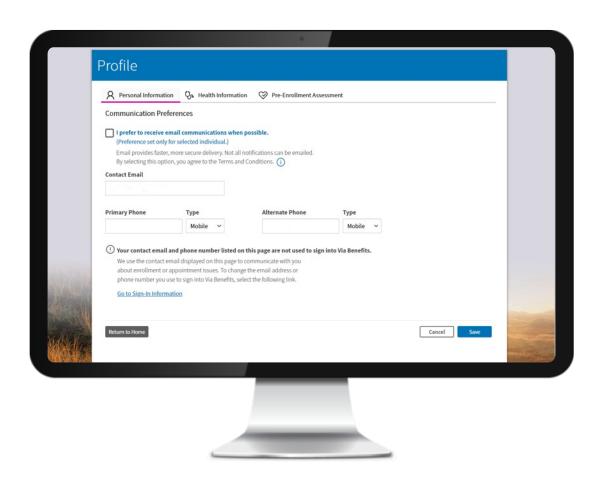




Pre-Enrollment — Communication Preferences

Select your communication preferences

- Email
- Primary Phone
- Alternative Phone





Pre-Enrollment — Caregiver Permission

Granting Caregivers' Permission

Establish permission for a family member or trusted friend to help you



Financial Power of Attorney (POA)

Allows a representative to take action on your behalf and make decisions

Authorization to Release Personal Information (Full)

Allows a representative to take action on your behalf

Authorization to Release Personal Information (Limited)

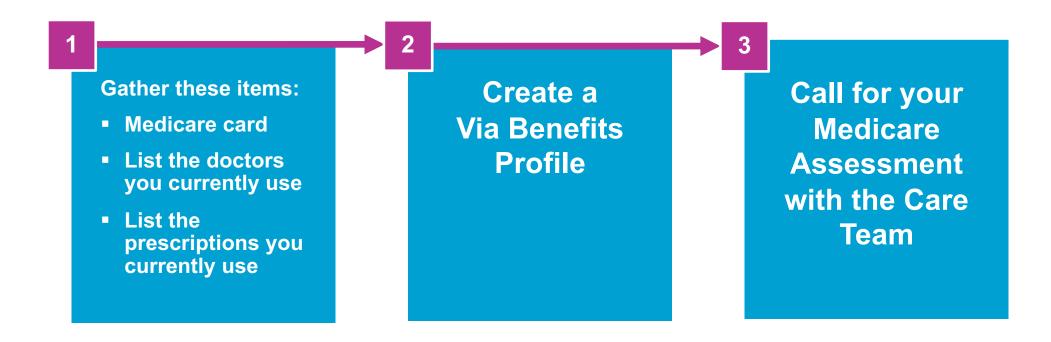
Allows a representative to get information only







Preparing for the Medicare Assessment



Your time is valuable. Go online and take these steps to maximize your time.



Call Our Via Benefits Care Team





CALL 1-888-427-8730 (TTY:711)

Monday – Friday

4:00 a.m. - 5:00 p.m. Pacific

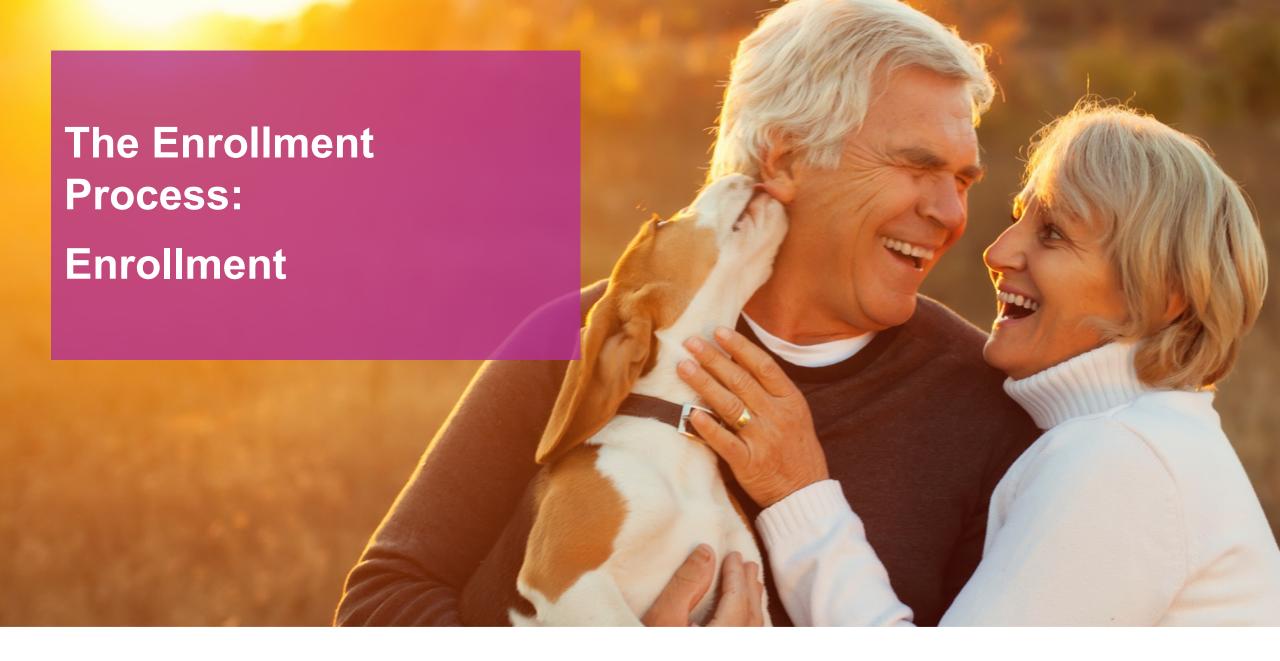
During Your Medicare Assessment We Will:

- 1. Verify your profile, if needed
- 2. Talk about your coverage needs
- 3. Evaluate different medical plan types:
 Medicare Advantage, Medicare Supplement
 and Part D prescription drug plans

4. Make a plan type recommendation

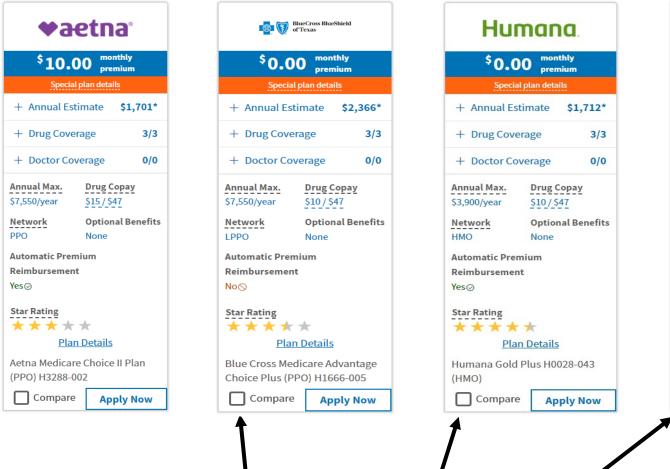
- 5. If enrolling by phone, schedule an enrollment appointment
- 6. If enrolling using the Via Benefits website, enroll during your enrollment window







Shop and Compare



+ Doctor Coverage 0/0 Annual Max. **Drug Copay** \$3,900/year \$2 / \$47 **Optional Benefits** Network **HMOPOS** None **Automatic Premium** Reimbursement Yes⊘ **Star Rating** **** Plan Details **AARP Medicare Advantage** SecureHorizons Plan 1 (HMO-... Compare **Apply Now**

United Healthcare

\$1,502*

3/3

\$0.00 monthly premium

+ Annual Estimate

+ Drug Coverage

Compare the details of up to 3 plans side-by-side-by-side



Ready to Enroll

Enroll Online

- Enroll anytime
- Compare plans side-by-side, select a plan, and enroll using the website
- Identity is verified when you sign into Via Benefits
- You read the disclaimers and confirm on the site
- Shop Via Benefits with help from a friend or family member

After you select your plan, allow up to 15 minutes to complete your application

Enroll By Phone

- Call at your appointment time or anytime during the enrollment window
- A member of the care team will help you review and enroll in a plan
- Identity is voice-verified
- Disclaimers are read to you
- With your permission, a friend or family member may join the call



After you select your plan, allow up to 45 minutes to complete your application







Post Enrollment Communications

Selection Confirmation Letter

This will confirm your plan choices

Communications from Your Confirmed Insurance Carrier

You will receive a packet with your new insurance cards and information about your new plan benefits

Welcome Letter

Shows the next steps you'll need to take to choose a new plan with Via Benefits





Watch our video at my.viabenefits.com/ACERA



Top Frequently Asked Enrollment Questions

1. How soon may I enroll in a new plan?

You can enroll in your new plan 3 months before your birthday month, or 3 months before you retire. You can also change your plans every year during the Annual Enrollment Period, Oct 15th through Dec 7th.

2. Can I enroll online? Can I get help from a benefit advisor when enrolling?

Yes. If you would like to do self-service online enrollment, that is available 24/7 for about 93% of the plans that we represent. OR, you may schedule an enrollment consultation appointment and a licensed benefit advisor will conduct a phone consultation and enroll you over the phone. Any time you have questions you may call in to our service center – 11 hours a day, Monday through Friday.

3. Is there a fee for the Medicare Assessment?

No, there is never a fee for any of our consultative services. We would be delighted to serve as your healthcare advocate for as often and as long as you would like to use us.







Health Reimbursement Arrangement (HRA)

Your HRA funding will be available: January 1, 2024 Unused funds WILL NOT rollover...so use it



Tax-Free Account

Used to reimburse you for eligible post-tax health care premiums

Per the IRS

HRA contributions are tax free, if you are eligible, you pay first and then get reimbursed

If You Are Eligible

ACERA will make an annual contribution to your HRA

Get Reimbursed

For eligible medical and drug plan <u>premiums</u> or Out of Pocket expenses



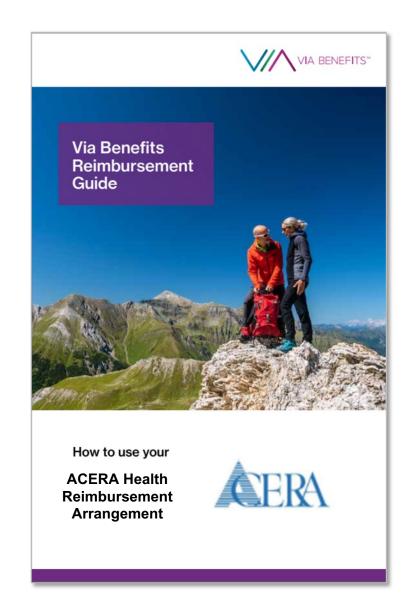
If Eligible for the HRA

Via Benefits Reimbursement Guide

- Contains all necessary instructions on how to use your HRA, including setting up direct deposit, use of the mobile app, and filing claims for reimbursement
- Should arrive within two weeks of the date your new coverage begins

Reimbursement Arrangement

- Enroll in a medical plan through Via Benefits before your enrollment period ends to have access to your HRA
- You must remain enrolled through Via Benefits to continue to have access to your HRA





Top Frequently Asked Funding Questions

1. Can I set up monthly recurring reimbursement?

Yes, about 93% of the plans that we represent participate in our Automatic Reimbursement (A/R) process. This means you may just toggle ON/OFF if you would like a particular premium to be automatically reimbursed each month (up to the amount available in your HRA) – you won't have to submit any proof of payment. For the small 7% of plans that do not participate in our A/R all you have to do is one-time, at the beginning of each year, submit a 'recurring reimbursement request' with proof of payment, and our system will know that you would like us to queue this up each subsequent month of that year for you, without you having to submit any future proof of payment.

2. Can I submit any amount for reimbursement?

We reimburse like-dollar-for-like-dollar amounts based upon what amount is shown on your proof of payment, up to the amount available in your RA account.

3. What happens if I submit an expense for reimbursement and there isn't enough money in my RA account?

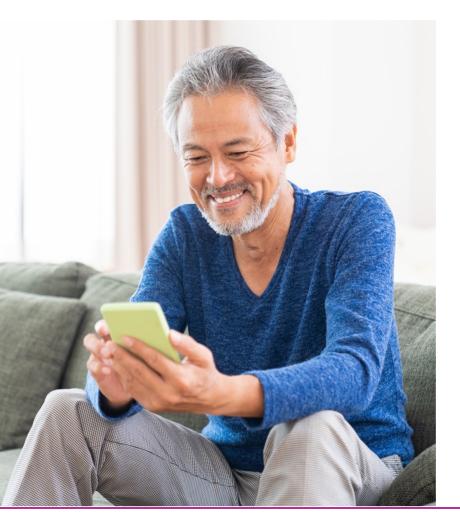
You may only be reimbursed up to the amount available in your HRA account. Additionally, since there is no rollover, you'll want to use up each year's contribution to the full extent.







Ready, Let's Go!



Pre-Enrollment

- ☐ Create a Via Benefits Profile at my.viabenefits.com/ACERA
- ☐ Call us at **1-888-427-8730** and complete your **Medicare assessment**
 - Schedule your enrollment appointment either during the call or enroll online

Enrollment

- □ Call us and schedule an appointment time, during the Annual Enrollment Period, Oct 15th through Dec 7th. Enroll using the Via Benefits website any time during your enrollment period
- ☐ Watch for communications about your new coverage

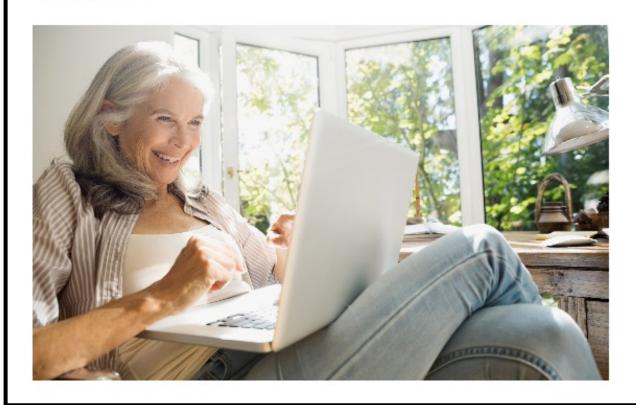
Post-Enrollment

☐ Watch for communications about your new coverage



Helpful Resources

Videos





Helpful Resources

Via Benefits has produced a collection of videos to assist you in finding the answers you need. View our <u>full video library</u> to access this additional guidance and information.

Start Watching

Go online now to set up your profile and complete your pre-enrollment assessment!

my.viabenefits.com/ACERA

1-888-427-8730

Monday – Friday 4:00 a.m. – 5:00 p.m. Pacific



