



# New York City Office of Labor Relations Health Benefits Program

[www.nyc.gov/olr](http://www.nyc.gov/olr)

## Medicare Part D Information For Medicare-Eligible Retirees Who Currently Receive Prescription Drug Coverage Through Their Health Plan

The Medicare Modernization Act (MMA) of 2003 amended the Social Security Act by establishing Medicare Part D - a prescription drug benefit which will become effective January 1, 2006. Below is information which will be helpful to you in understanding this new benefit and how it affects you.

### Medicare Part D Prescription Drug Coverage

Medicare Part D prescription drug coverage is a voluntary insurance program provided by private companies that have been approved by Medicare. Starting January 1, 2006 new prescription drug coverage will be available to everyone who has Medicare. For that reason, you will be receiving many offers and advertisements from private companies offering you prescription drug coverage. The City of New York Health Benefits Program will be offering comparative benefits to you as well through your health plan.

If you choose a Medicare Part D plan from an outside vendor you could jeopardize your City of New York health plan coverage.

In the event you choose to receive prescription drug benefits from a health plan not offered through the City of New York, you should be aware of the following:

- ◆ If you are enrolled in a Medicare HMO and you choose to purchase a Medicare Part D plan from another source, you may be disenrolled from your City health plan.
- ◆ If you are in the GHI/Empire BlueCross BlueShield Senior Care Plan and drop the optional rider you will also lose the Empire BlueCross BlueShield 365 day hospital coverage.
- ◆ Your premium payments will no longer be deducted from your pension check. You will be responsible for payment to your new prescription drug provider.

All drug plans must provide drug coverage that is at least as good as the Standard Medicare Part D prescription drug coverage. All health plans offered through the City of New York Health Benefits Program (listed in this brochure) will offer prescription drugs plans that are qualified Medicare Part D plans.

If you are currently enrolled in one of the City's health plans and have prescription drug coverage through that health plan **you don't need to do anything. You will be automatically enrolled in Medicare Part D. Your prescription drug benefit through your plan will be automatic.**

Some City plans may offer an enhanced Medicare Part D benefit, which may be a more comprehensive benefit than the Standard Medicare Plan D benefit. You will receive detailed information directly from your health plan about your prescription drug coverage. Please read it carefully and call the plan directly if you have any questions. **Remember, there is nothing for you to do.**

### Opt Out Provision

If you wish to opt out of your City of New York sponsored health plan you must follow the procedures outlined on the next page.

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## **Important Information About Medicare Health Plans Enrollment and Disenrollment**

Each of the health plans listed in this notice offer a prescription drug plan which is either a Standard Medicare D Plan or an enhanced prescription drug plan.

If you wish to transfer to one of these plans, contact the plan for information about its hospital/medical benefits and prescription drug coverage. A special transfer opportunity will take place from November 1, 2005 to November 30, 2005. Health plan transfers will be effective on January 1, 2006.

### **If You Transfer from a Medicare HMO to a Supplemental Plan**

If you disenroll from a Medicare HMO and you wish to transfer to a Medicare supplemental plan, you must notify the HMO or the Social Security Administration, in writing, that you no longer wish to participate in that HMO. Send a copy of that notice along with a Health Benefits Application to the City of New York's Health Benefits Program, 40 Rector Street - 3rd Floor, New York, New York 10006. An application can be obtained by writing to our office or downloaded from our website.

### **If You Transfer from a Supplemental Plan to a Medicare HMO**

If you transfer from a supplemental plan to a Medicare HMO you must contact the Medicare HMO directly, and request a special application to join that plan. When you enroll directly with the Medicare HMO make sure that you inform the health plan representative that you are a "City of New York" retiree. If your spouse is also covered by you for health benefits, make sure that he/she also completes an enrollment application. Both the retiree and covered dependent(s) must be enrolled in the same health plan under the City's program. Send a copy of that application to the City of New York Health Benefits Program, 40 Rector Street - 3rd Floor, New York, New York 10006.

### **If You Transfer from a Medicare HMO to another Medicare HMO**

If you wish to transfer from a Medicare HMO to another Medicare HMO you can do so by enrolling directly in the new plan. When you enroll directly with the Medicare HMO make sure that you inform the health plan representative that you are a "City of New York" retiree. If your spouse is also covered by you for health benefits, make sure that he/she also completes an enrollment application. Both the retiree and covered dependent(s) must be enrolled in the same health plan under the City's program. Send a copy of your application to the City of New York Health Benefits Program, 40 Rector Street - 3rd Floor, New York, New York 10006.

### **If You Disenroll from a Medicare HMO**

If you wish to disenroll from a Medicare HMO and are not enrolling in another Medicare HMO, you must notify the health plan or the Social Security Administration, in writing, that you no longer wish to participate in that plan. If you do not notify the health plan or the Social Security Administration that you no longer wish to participate you will not have any coverage from either the health plan or from Medicare.

### **If You Wish to Elect or Drop the Optional Rider**

If you wish to elect or drop the Optional Rider of the following Medicare Supplemental plans: Empire Medicare-Related Coverage, GHI/EBCBS Senior Care, GHI HMO Medicare Supplement or HealthNet MedPrime you must contact the Health Benefits Program, 40 Rector Street - 3rd Floor, New York, New York 10006. An application can be obtained by writing to our office or downloaded from our website.

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## The Following Plans are Offered by the Health Benefits Program

### Medicare Supplemental Plans

The traditional Medicare supplemental plan allows for the use of any provider and reimburses the enrollee who may be subject to Medicare or plan deductibles and coinsurance. The following are supplemental plans:

Health Plan	Phone Number	Web Address
Empire Medicare-Related Coverage	(800) 767-8672	www.empireblue.com/nyc
GHI/EBCBS Senior Care		
GHI:	(212) 501-4444	www.ghi.com
Empire BlueCross BlueShield:	(800) 767-8672	www.empireblue.com/nyc
GHI HMO Medicare Supplement	(877) 244-4466	www.ghi.com
Health Net MedPrime	(800) 441-5741	www.healthnet.com

### Medicare HMOs\*

Medicare HMO plans are those in which medical and hospital care is only provided by the HMO provider. Any services, other than emergency services, that are received outside the HMO, that have not been authorized by the HMO, will not be covered by either the HMO or Medicare. Any cost incurred would be the responsibility of the enrollee. The following plans are approved Medicare HMOs:

#### Medicare HMOs Available in the New York Metropolitan Area:

Health Plan	Phone Number	Web Address
*Aetna Golden Medicare 10 Plan	(800) 445-8742	www.aetna.com
*Empire Senior Plan Direct	(800) 809-7328	www.empireblue.com/nyc
*Elderplan	(718) 921-7898	www.elderplan.org
*HIP VIP Premier	(800) 447-6929	www.hipusa.com
*Health Net SmartChoice	(800) 547-8734	www.healthnet.com
*Oxford Medicare Advantage	(800) 203-5631	www.oxhp.com

#### Medicare HMOs Available Outside the New York Metropolitan Area:

Health Plan	Phone Number	Web Address	**Location
*Aetna Golden Medicare 10 Plan	(800) 445-8742	www.aetna.com	(PA)
*AvMed Medicare Plan	(800) 782-8633	www.avmed.com	(Florida only)
*BlueCross BlueShield of Florida Health Options, Inc.	(800) 876-2227		(Florida only)
*CIGNA HealthCare for Seniors	(800) 592-9231	www.cigna.com	(Arizona only)
*Humana Gold Plus	(800) 833-1289	www.humana.com	(Florida only)

**\*YOU CANNOT ENROLL IN ANY OF THE MEDICARE HMOS LISTED ABOVE THROUGH THE CITY'S HEALTH BENEFITS PROGRAM.** Refer to the instructions in this brochure if you wish to enroll in or disenroll from one of these Medicare HMO plans and contact the health plan directly.

\*\*These plans are only available in certain counties in the states listed above. You must contact the plan directly to see if the plan for City of New York retirees is available in your area.

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**Retiree Premium Rate Chart**  
**Monthly Plan Cost Effective January 1, 2006**

Medicare-eligible retirees enrolled in Medicare HMO Plans will receive enhanced prescription drug coverage from the Medicare HMO if their union welfare fund does not provide prescription drug coverage, or does not provide coverage deemed to be equivalent, as determined by the Health Benefits Program, to the HMO enhanced prescription drug coverage. The cost of this coverage will be deducted from the retiree's pension check.

**The plans and costs listed below are for Medicare-Eligible Retirees who currently receive prescription drug coverage through their health plan.**

**Medicare HMOs offered by the City of New York which include Prescription Drug Coverage**

Name of Health Plan	Medicare (Per Person)
Aetna Golden Medicare 10	
New York	\$127.80
New Jersey	\$109.40
Pennsylvania	\$132.10
AvMed (Florida)	\$0.00
BlueCross BlueShield of Florida (Health Options)	\$0.00
CIGNA Health Care for Seniors (AZ)	\$135.00
Elderplan	\$0.00
Empire Senior Plan Direct	
New York	\$49.62
Rockland/Westchester	\$100.83
Nassau	\$93.74
Suffolk	\$105.13
HealthNet SmartChoice	
Connecticut	\$48.00
New York	\$46.00
HIP VIP Premier Medicare	\$72.03
Humana (Florida)	\$50.00
Oxford	
New York	\$81.31
New Jersey	\$78.93

**Medicare Supplement Plans offered by the City of New York with an Optional Rider for Prescription Drugs**

Name of Health Plan	Medicare (Per Person)
Empire Medicare-Related Coverage	
Basic Plan	\$67.17
Optional Rider - Prescription Drugs	\$93.00
<b>Total</b>	<b>\$160.17</b>
GHI/EBCBS Senior Care	
Basic Plan	\$0.00
Optional Rider - Prescription Drugs	\$81.00
365-day Hospitalization	\$2.79
<b>Total</b>	<b>\$83.79</b>
GHI HMO Medicare Supplement	
Basic Plan	\$41.84
Optional Rider - Prescription Drugs	\$21.68
<b>Total</b>	<b>\$63.52</b>
HealthNet MedPrime	
Basic Plan	\$55.48
Optional Rider - Prescription Drugs	\$252.09
<b>Total</b>	<b>\$307.57</b>