

**Health & Benefit Trust Fund  
of the I.U.O.E.  
Local 94-94A-94B  
School Division**

**Retirement Seminar  
May 23, 2022**

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## School Division - Eligibility

**Active coverage** ends the last day of the month following the month in which you terminate covered employment (including retirement) or the date that your contributing Employer stops making contributions to the Plan.



# Retiree Eligibility Requirements for PPO Retiree Benefits Effective January 1, 2020.

Retirees **ages 62-64**, ineligible for Medicare regardless of disability status, must satisfy **all** the following requirements as described under Section 4 of the SPD:

- ❖ Must be at least age 62 on their respective retirement date under the Central Pension Fund,
- ❖ Have at least **twenty-five (25)** years of Total Credited Service (as defined in the Central Pension Plan),
- ❖ Be receiving a pension under the Central Pension Plan,
- ❖ Must have continuous coverage under the Fund for the **fifteen (15)** years immediately preceding their respective retirement date under the Central Pension Plan, and
- ❖ Must pay the required premiums set forth under Section 4 of the SPD, as amended from time to time.

## Note, the following additional special rules regarding the PPO Retiree Benefit:

- ❖ Your Eligible Dependent (as defined under Section 1 herein) will be eligible for the PPO Retiree Benefit for as long as you remain eligible for the PPO Retiree Benefit.
- ❖ You and any Eligible Dependents' PPO Retiree Benefit coverage will terminate on the last day of the month prior to the month in which you reach age 65.
- ❖ COBRA Continuation Coverage may be purchased for a maximum of 18 months for any Eligible Dependent who loses coverage following this event.
- ❖ Your eligible spouse who is terminated from the PPO Retiree Benefit coverage because you reach age 65 will be eligible for the Medicare Related Premium Reimbursement Benefit when they become Medicare eligible.

## Retiree Eligibility Requirements for Medicare Retirees for the Death and Medicare Related Premium Reimbursement Benefits as described under Section 4 of the SPD

In order to be eligible for these benefits a Medicare Retiree Member must satisfy **all** the following requirements:

- ❖ Have **Fifteen (15)** years of Total Credited Service (as defined in the Central Pension Plan)
- ❖ Be receiving a pension from the Central Pension Plan, and
- ❖ Must have continuous coverage under the Health & Benefit Fund for the **five (5)** years immediately preceding their respective retirement date under the Central Pension Plan.

# Extension of Benefits for Total and Permanent Disability (Active Member Only)

- ❖ If a member who is actively working, becomes totally and permanently disabled and not eligible for Medicare at the time eligibility terminates, the member will remain eligible for the disabling condition for 29 months, or until Medicare eligible, if earlier.
- ❖ This applies only to members with a total & permanent disability, with a Social Security Disability Award as evidence
- ❖ COBRA – you can elect to participate and purchase COBRA for any of your eligible dependents for 18 months

# School PPO Retiree Premiums



- ❖ PPO Retirees that meet the eligibility requirements for coverage will be required to pay a premium in order to continue their PPO Retiree health coverage.
- ❖ The PPO Retiree premiums are subject to change from time to time.
- ❖ **Effective June 1, 2021**, the premium is \$950.00 per month for individual or family coverage.
- ❖ This enable's you to continue using the Empire Blue Cross PPO benefits you had while an active member.

## ***All Eligible Retirees Paying a PPO Retiree Premium: Hospital, Prescription Drug, Dental & Eye***

- ❖ As long as you are paying the monthly PPO Retiree premium for retiree coverage, you are eligible for the same prescription drug, dental and eye care benefits that you would have received if you remained an eligible active member.
- ❖ Hospital Benefits are the same as an active member if you are not Medicare Eligible.



## PPO Retiree Premium Payment Requirements & ACH Premium Payment Options

- ❖ The PPO Retiree premium payment is due on the 20<sup>th</sup> of the prior month or the next business day for the 1<sup>st</sup> of the next month of Retiree Coverage whether you **pay by check or ACH.**
- ❖ The Fund can collect your premiums via an electronic transfer from your bank account. This will alleviate the need to remember to send the premium payment checks in.
- ❖ The Fund Office provides the ACH application in the Retiree benefit information sent to you when the Fund is notified of your Retirement.
- ❖ There is a grace period of thirty (30) days to pay the monthly Retiree premium payments whether you pay via ACH or by check.
- ❖ If payment is not made by the end of the applicable thirty (30) day grace period, your health coverage under the Plan will terminate as of the end of the last month for which you timely paid, and thereafter, cannot be reinstated.

## *Death Benefit*

- ❖ If you meet the eligibility requirements for the PPO Retiree Benefits, or the Medicare Retirees Death and Medicare Related premium reimbursement benefits you are eligible for a \$3,000 death benefit.
- ❖ This is not a life insurance policy it is a benefit under the Health and Benefit Fund. If you are not eligible for Retiree medical benefits you are not eligible for the death benefit.

## ***Death Benefit continued~Naming Your Beneficiary***

- ❖ Please make sure that you designate your beneficiary for the Health and Benefit Fund Death Benefit.
- ❖ You can designate a primary and contingent beneficiary.
- ❖ It is a good idea to review and update your beneficiary with the Health & Benefit Fund when you retire.
- ❖ This will ensure that your beneficiary information is accurate at the time of your retirement.
- ❖ Please remember to update your beneficiary if the person you named as the beneficiary is deceased.

## Coverage When The Member is Deceased

- ❖ Eligible spouse's & dependents are eligible for health coverage for one year after the eligible Retiree member passes away.
- ❖ If you are a PPO Retiree, the premium required per month must be paid in order to be eligible for coverage for one year.

# COBRA

- ❖ If you do not meet the eligibility requirements for retiree benefits and are not eligible for Medicare, you may elect to participate in COBRA for 18 months.
- ❖ COBRA will provide you with the same coverage that you are receiving as an active member.

# COBRA Premiums

COBRA premium for the School Division effective January 1, 2022

- ❖ \$ 875.42 for an individual
- ❖ \$ 2,200.94 for family coverage
- ❖ Each January the COBRA rates are revised. The COBRA participant is notified the prior month of all premium changes.

## Medicare Retirees' Death & Medicare Related Premium Reimbursement Benefits

- ❖ Medicare Retirees that meet the eligibility requirements for coverage will be eligible to receive a reimbursement of an annual calendar maximum of \$7,000 for Medicare Related Premiums paid.
- ❖ The benefit includes the eligible retiree's spouse. The annual calendar year maximum of \$7,000 is not applied on a per person basis, but instead is a combined annual maximum for Medicare Related Premiums paid by the eligible retiree and/or their spouse.
- ❖ In order to be reimbursed for the Medicare Related premiums that you (or your spouse) have paid during a calendar year, you (and your spouse) must send the Plan proof of such premium payments within one year following the end of the calendar year.

# Medicare Retirees' Death & Medicare Related Premium Reimbursement Benefits~continued

You will be required to complete the Medicare Related Premium Reimbursement Form. The form can be downloaded at [www.local94.com](http://www.local94.com) or you may contact the Health and Benefit Fund for the form to be mailed to you.

If you or your spouse have SSI and are qualified for Medicare the following proof must be submitted:

- ❖ Form SSA-1099 Social Security Benefit Statement (this statement can be obtained from your local Social Security Office)

If you (or your spouse) do not qualify for SSI, but qualify for Medicare and pay premiums directly, the following proof must be submitted:

- ❖ "Proof of Income" Letter or "Proof of Award" Letter from Social Security. You can also request the form online via <http://ssa.gov/onlineservices/> (It may take up to 30 days for delivery); and
- ❖ A cancelled check (front and back) and a copy of the quarterly invoice statement (CMS 500) from Social Security Office for the current year; or
- ❖ Latest bank or credit card statement showing the current Medicare related premiums charged against your account (please hide your account number).



## Medicare Retirees' Death & Medicare Related Premium Reimbursement Benefits~continued

- ❖ In conjunction with the Reimbursement for Medicare Related Premiums, the Fund has a partnership with HealthPlanOne to assist you in exploring the healthcare marketplace in your retirement.
- ❖ If you are Medicare eligible, HealthPlanOne will be able to evaluate the Retiree Health Insurance options available to you.
- ❖ There is a broad selection of designs for Medicare Supplement, Medicare Advantage and Plan D programs offered by a wide array of carriers.
- ❖ The Fund is confident HealthPlanOne will be able to assist you in finding a plan that meets your needs at a competitive price.

## Medicare Retirees' Death & Medicare Related Premium Reimbursement Benefits~ continued

- ❖ These services are available to you at no cost or obligation on your part. You are not required to use HealthPlanOne's services nor are you required to make any changes if you are satisfied with your current plan.
- ❖ Through HealthPlanOne, you will have the option of accessing a benefit website that offers online decision-tools that provide detailed information on plan designs and pricing. In addition, HealthPlanOne benefit Advisors are available to provide personalized assistance.
- ❖ You can reach a benefit Advisor at 844-267-0569. The Web Address for Fund retirees who wish to inquire online is <http://www.hpoexchange.com/local94/>.
- ❖ Each year thereafter if you are eligible as a School Retiree and on Medicare, HealthPlanOne is available to you if you are interested in making a change to your current Medicare coverage during the open enrollment period.



## Retirement Plan

### Ready to Retire? Contact the Fund Office

We highly recommend that all members contact the Fund Office to discuss exactly what benefits they may be eligible for at retirement and what the costs involved are.



HEALTH INSURANCE

APPROVED

# Questions?

If you have questions regarding your eligibility and/or health care coverage, please contact the Health & Benefit Fund Office.

Monday - Friday

8:00AM - 4:00PM

212 - 331-1800

Local 94 website at [www.local94.com](http://www.local94.com)



## Final Word

This presentation summarizes the Plan's key features. The formal terms are set forth in the official plan documents and are not changed or interpreted by this presentation. The official plan documents will govern in all cases.

