

RETIREE HEALTH BENEFITS

Along with a monthly pension, retirement benefits may include medical coverage for retirees, disabled members, and survivors who are receiving monthly TRS benefits and their spouse or qualified same-sex partner, and eligible dependent children. Coverage under the AlaskaCare Retiree Health Plan differs from coverage you have with your current employer.

Medical Coverage at Retirement

The following benefit recipients, their spouse or qualified same-sex partner, and eligible dependent children will be covered automatically by the AlaskaCare Retiree Health Plan when they start receiving monthly benefits:

- All members regardless of date of entry if they are receiving TRS disability benefits;
- Members who first entered the TRS before July 1, 1990 (Tier I), and their survivors; and
- Members who first entered the TRS on or after July 1, 1990 (Tier II), and their survivors if they have at least 25 years of paid-up membership service or are at least age 60.

According to Alaska Statutes 39.35.680(11) and 14.25.220(13), eligible dependents are:

- Your dependent children age 18 and under.
- Your dependent children, under 23 years old, registered at and attending on a full-time basis an accredited educational or technical institution recognized by the Department of Education and Early Development.
- Your dependent children, 19 or older and not a full-time student, only if he or she is totally and permanently disabled. Please contact the Division for additional information about eligibility, and for information about how to provide proof of your dependent's disability.
- This coverage ends when the member or survivor dies or is no longer eligible to receive monthly benefits.

Members who do not qualify for system-paid health coverage may purchase medical coverage for themselves, spouse or qualified same-sex partner, and eligible dependent children and pay the monthly premium.

These members and their survivors have the option of selecting and paying for medical coverage for:

- The benefit recipient only;
- The benefit recipient and spouse or qualified same-sex partner;
- The benefit recipient and eligible dependent children; or
- The benefit recipient and family, which includes spouse or qualified same-sex partner and any eligible dependent children.

Premiums for the medical coverage will be deducted from the monthly benefit payment. If the amount of the benefit is less than the total of the premiums due, the benefit recipient must pay the premiums directly to the claims administrator.

For more information including a current description of the benefits, please refer to the *AlaskaCare Retiree Insurance Information Booklet*.

Optional Health and Life Plans

TRS benefit recipients may purchase additional coverage for:

- Dental-Vision-Audio coverage for self, spouse or qualified same-sex partner, and eligible dependent children;
- Long-Term Care coverage for self and/or spouse or qualified same-sex partner; and
- State sponsored Optional Life Insurance State of Alaska employees and those political subdivision employees participating in the State of Alaska Optional Life Insurance benefits may elect to continue this coverage while retired.

Premiums for the optional plans will be deducted from the monthly benefit payment. If the amount of the benefit is less than the total of the premiums due, the benefit recipient must pay the premiums directly to the claims administrator.

For more information regarding the optional health and life plans, including enrollment restrictions, please refer to the *AlaskaCare Retiree Insurance Information Booklet*.

Employer Sponsored Life Insurance

If you are participating in a group life insurance plan sponsored by your employer you may be able to convert this coverage to a private policy. Please contact your employer's personnel or human resources office for more information.

Medicare and Your TRS Medical Coverage

There are four parts to Medicare health coverage. They are:

- **Part A** – Hospitalization or “inpatient expenses;”
- **Part B** – Physician or “outpatient expenses;”
- **Part C** – Medicare Advantage (health plan approved by Medicare like an HMO but run by a private company. Contact Medicare for more information); and
- **Part D** – Medicare Prescription Drug Coverage. (We do not address Medicare Part D in our publications because the prescription drug benefits you have through AlaskaCare are at least as good as the required benefits offered under Medicare Part D.) If you do not enroll in Part D, your AlaskaCare plan continues to be your primary drug coverage.

Medicare Enrollment

If you are receiving Social Security benefits before age 65, you will be automatically enrolled in Parts A and B of Medicare when you turn age 65. If you are *not* receiving Social Security benefits, contact the Social Security Administration (SSA) three months before you turn age 65 to discuss enrolling in Medicare Parts A and B. Be sure to inform the SSA if you have health insurance through an employee group health plan that you or your spouse or qualified same-sex partner receive as an actively working employee.

If you are covered by such a plan, Medicare doesn't require you to enroll until the active plan terminates. However, if you do not enroll, the amount Medicare would have paid as the secondary plan is not paid by AlaskaCare. The AlaskaCare Retiree Health Plan recommends that you enroll in Medicare Part B at age 65.

NOTE

If you are working and receive health insurance from your employer, Medicare will tell you it is not necessary to enroll until your active employee health insurance terminates. However, the AlaskaCare Retiree Health Plan still recommends that, in certain situations, you enroll at age 65, even if Medicare does not. Please contact the Benefits Section for more information (see page 3 for contact information).

AlaskaCare Benefits Supplemental to Medicare

The benefits under AlaskaCare are supplemental to Medicare beginning at age 65. For services covered by both plans, the claims are paid first by Medicare and then by AlaskaCare—with AlaskaCare coordinating to pay up to 100% of covered expenses, less any deductible you have not yet met.

Medicare Part A

Who is eligible?

Most people are eligible for premium-free Part A coverage. This includes those who are eligible for a Social Security benefit. It also includes those who paid the Medicare tax while employed.

A few people are not eligible for premium-free Part A because they don't have enough Social Security or Medicare covered employment. If you are not eligible for Part A, Social Security will send you a letter confirming that. You must send a copy of that letter to the claims administrator. AlaskaCare will then continue to pay for Part A services just as it did before you turned age 65.

Medicare Part B

Who is eligible?

Everyone is eligible and must pay a premium for Part B coverage, whether or not you are eligible for Part A.

Failure to Enroll on Time

If you do not enroll in Medicare at age 65, AlaskaCare will estimate what Medicare would have paid and deduct that amount before paying medical expenses. You'll have a larger part of the bill to pay. **Remember:** *Everyone* is eligible to enroll in Medicare Part B and should do so at age 65 to avoid paying for uncovered expenses.

If you do not enroll in Medicare when you first become eligible, you have to wait until the next Medicare General Enrollment Period. If that happens, there may be a period of time when most of your medical expenses are not reimbursed by the AlaskaCare Retiree Health Plan or Medicare.

For more information regarding Medicare benefits, please contact your local Medicare office or visit the Medicare information site on the Internet at www.medicare.gov. For more information on coordination between Medicare and the AlaskaCare Retiree Health Plan, please see our brochure *Medicare and the AlaskaCare Retiree Health Plan* available on the Division of Retirement and Benefits website at alaska.gov/drb or by mail by request.