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Chief Executive Officer/Executive Vice President



For Your Information	afspa MINICA PORTE SUPEL PROPERTY ALLEGATION
■Many regulations for FEHB and Medica	are
Review FEHB Brochure	
Review MEDICARE information materi	al
This information applies only to Federal annuitants	l employees/
■Not applicable to individuals without I	FEHB
■Not applicable to private sector (com	mercial insurance)
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Acronyms I Will Use	afspa
	HARRICA POPER ASSISTED PROPERTY ALADOHOUS
■ FEHB – Federal Employees Health Be	nefits Program
■ FFS – Fee-for-Service	
■ HMO – Health Maintenance Organi:	zation
■ OOP – Out of Pocket	
■ OPM – Office of Personnel Manager	ment
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INFORMATION ACCURATE AS OF 1029-2024	
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For Your Information	afspa
	HARRICA PORT AL SIDE THE PROPERTY ALABOHROW
Biggest question.	•
	-
Should Lanroll in Par	
Should I enroll in Par	
Should I enroll in Par	

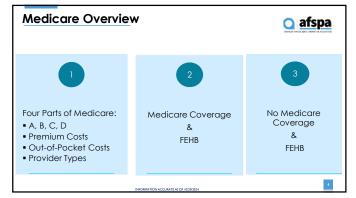
First Up: Medicare and Overseas





- Medicare DOES NOT cover care you receive outside the U.S., except in certain very limited situations
- Generally, your FEHB Plan (FFS) is primary for services you receive outside the 50 United States
 - You must the file a claim with your Plan, even if you have Medicare A and/or B
- •Are you going to spend a lot of time overseas?

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Medicare Has Four Parts		
Parts	Type of Insurance	Monthly Premium
Part A (Original Medicare)	Hospital Insurance	Free (in most cases)
Part B (Original Medicare)	Medical Insurance	\$174.70/month for 2024 (Standard before MAGI – Means Testing)
Part C – (Medicare Advantage)	Comprehensive	Includes Part B premiums. May be additional premiums
Part D	Prescription Drug Coverage	Varies by plan



Medicare Part A: Quick Facts afspa Everyone eligible for premium-free Part A should enroll You should consider enrolling at age 65 whether you are working or retired

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Medicare Part B: MEDICAL Coverage afspa **Covered Services** Doctors' services and tests Outpatient hospital services, including observation care Limited home health services (must be homebound) ■Durable medical equipment ■Kidney dialysis Certain preventive and screening services ■No Annual Physical Exam

Medicare Part B: Quick Facts



- ■Enrollment in Part B is voluntary at age 65
- Must pay a monthly premium
- •May pay a penalty if not enrolled at first opportunity and decide to enroll at a later date, <u>BUT</u>
 - Can defer Part B under certain situations, such as:
 - Employed and covered under group health plan based on current employment

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Medicare Part B: Quick Facts



Part B Premium is Means-Tested based on your Modified Adjusted Gross Income (MAGI)

You may pay an Income Related Monthly Adjustment Amount (IRMAA)

What could that mean for you?

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2024 Part B Premium: Modified Adjusted Gross Income (MAGI) Two Year Look-Back on Income



Income: Individual 2022 Tax Year	Income: Jointly 2022 Tax Year	2024 Monthly Premium
\$103,000 or below	\$206,000 or below	\$174.70
\$103,001 - \$129,000	\$206,001 -\$258,000	\$244.60
\$129,001-\$161,000	\$258,001-\$322,000	\$349.40
\$161,001 -\$193,000	\$322,001-\$386,000	\$454.20
\$193,001- \$500,000	\$386,001-\$750,000	\$559.00
Above \$500,000	Above \$750,000	\$594.00

"Medicare Premiums: Rules for Higher-Income Beneficiaries": https://www.ssa.gov/benefits/medicare/medicare-premiums.html

Requesting a Medicare **Premium Re-determination**



- Allowable reasons for requesting a new determination from the SSA (QLE's):
 - If married, divorced or widowed
 - If you or your spouse stopped working or reduced work hours
 - More recent tax information is available
 - Call SSA at 1-800-772-1213 for information
- ■To view "Medicare Premiums: Rules for Higher-Income Beneficiaries": https://www.ssa.gov/benefits/medicare/medicarepremiums.html

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Medicare Part C: Medicare Advantage Plan afspa **QUICK FACTS**



Comprehensive type options approved by



- May receive additional benefits (e.g., vision, dental, podiatry) and lower cost-sharing
- Receive Part A and Part B coverage, but not from Original Medicare
 - □Different OOP costs and rules apply
- FEHB Plans won't waive deductibles, coinsurance, etc. for care outside of MAP service area.
- Can suspend FEHB coverage if enrolled in a commercial MAP

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Medicare Part D: Prescription Drug Coverage **QUICK FACTS**





- ■Costs vary by plan
- Most people will pay
 - Monthly premium (MAGI applies)
 - Deductible, copays, coinsurance
- All FEHB Plans offer creditable coverage
- ■Per OPM, Federal retirees likely will not benefit from enrolling in Medicare Part D and paying extra for prescription drug benefits

2024 Part D Premium: Modified Adjusted Gross Income (MAGI) Two Year Look-Back on Income



Income: Individual 2022 Tax Year	Income: Jointly 2022 Tax Year	2024 Individual Monthly Premium		
\$103,000 or below	\$206,000 or below	Plan Premium		
\$103,001 - \$129,000	\$206,001 -\$258,000	+\$12.90		
\$129,001-\$161,000	\$258,001-\$322,000	+\$33.30		
\$161,001 -\$193,000	\$322,001-\$386,000	+\$53.80		
\$193,001- \$500,000	\$386,001-\$750,000	+\$74.20		
Above \$500,000	Above \$750,000	+\$81.00		
"Medicare Premiums: Rules for Higher-Income Beneficiaries": https://www.ssa.gov/benefits/medicare/medicare-premiums.html				

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Signing Up for Medicare at AGE 65



■Initial Enrollment Period – 7 months

- 3 months/birthday month/3 months
- Everyone eligible for premium-free Part A should enroll at age 65

■General Enrollment Period*

Annually: January-March

*Part B Late Penalty – as long as you have Medicare: 10% for **each** full 12-month period you didn't sign up

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Signing Up for Medicare at AGE 65



Special Enrollment Period

- 8-month period after employment ends or current employment group health plan ends
- Retiree health plans don't count as "current"
- Required forms: CMS-40B application and CMS-L564 proof of current employment coverage (signed by employer)
- Start early! Have HR complete shortly before retirement date

Notify your FEHB Plan when you enroll in Part A; and if you enroll in Part B $\,$

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Signing Up for Medicare at AGE 65 afspa ■Ways to apply for Medicare Part A and/or Part B: 1. Online: Visit ssa.gov/benefits/medicare 2. By phone: Call 1-800-772-1213 or 1-800-325-0778 (TTY) 3. In-person: Visit your local Social Security office 4. Outside the U.S. – Enroll at your nearest U.S. Social Security office, usually inside the U.S. Embassy/Consulate. Learn more at https://www.medicare.gov/basics/get-started-with-medicare/signup/when-can-i-sign-up-for-medicare

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Medicare Part A: Hospital coverage **OUT-OF-POCKET COSTS FOR 2024**

Medicare Part B: MEDICAL coverage

■Hospital deductible: \$1,632 for inpatient days 1 through 60 of each benefit period

afspa

- Additional \$408 daily copay for inpatient days 61 through 90
- Additional \$816 daily copay for days over 90 (Lifetime Reserve)
- Skilled Nursing Facility (SNF): \$204 daily copay for days 21 through 100 (ONLY SKILLED CARE)

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afspa out-of-pocket costs FOR 2024 Part B Yearly deductible: \$240 ■20% coinsurance Extra billing by non-participating physicians – depending on your FEHB Plan And let's talk about physicians......

Retired Over 65: Fee-for-service (FFS) Medicare B Primary Provider <mark>Accepts</mark> Assignment	afspa Metica Potesta Stati Potesti M. Allicontus
Participating providers agree to:	
 Be paid by Medicare (accept the amount M approves for their services) 	ledicare
 Charge only the Medicare deductible and/o coinsurance amount 	or
■FEHB Plans will cover cost-sharing	
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Retired Over 65: FEE-FOR-SERVICE (FFS) Medicare B Primary Provider Does NOT Accept Assignment (Non -Participating Providers) Physicians can charge more than the Medicare-approved amount, but there is a limit (limiting charge), usually about 15% more FEHB Plans will cover regular cost-sharing Patient responsible for the extra 15% Some FEHB plans will cover cost-sharing up to the limiting charge

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Retired Over 65: FEE-FOR-SERVICE (FFS) Medicare B Primary Private Contracts – Opt Out Providers! Individual written agreement between you and your doctor not to bill Medicare: Original Medicare, other Medicare plans and Medigap plans will NOT pay You will pay ALL charges No claim can be submitted to Medicare You cannot be asked to sign in an emergency FEHB plan will not pay any more than they would have paid if Medicare had made payment (generally 20%) Per Federal Regulation

Provider accepts assignment / Does not accept / Private Contract			afsp	
	Provider Accepts	Provider DOES NOT Accept	Private Contract (Opt Out)	
Billed amount	\$1,000	\$1,000	\$1,000	
Medicare Approved Amount	\$800		\$800	
Medicare Limiting Charge = 115% of the Medicare Approved Amount		\$920		
Medicare pays	- \$640	- \$640	- \$0	
FEHB plan pays 20% of Approved Amount	- \$160	- \$160		
FEHB plan pays 20% of Approved Amount			- \$160	
Your liability	S0	\$120	\$840	

Retired Over 65: FEHB FFS & Medicare Medicare A & B Primary



- ■Plans fill **most** of the gaps in Medicare for services covered by them (be aware of SNF limits)
- Plans waive some costs, like deductible, medical coinsurance/copays, etc.
- ■Plans coordinate coverage (COB) with Medicare
- Patient generally has little or no liability

The FEHB plans remain primary for PRESCRIPTION DRUGS (except for very <u>limited</u> number like injections at dr's office, certain oral cancer drugs, immunosuppressive drugs, etc.)

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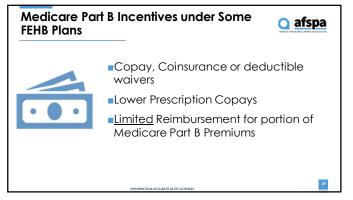
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FEHB HMO & Medicare B: Retired Over 65



- ■FEHB HMO enrollees may not need Medicare Part B
 - May not recover the cost of Part B expenses for benefits received
- ■However, Part B pays for
 - Costs involved with seeing providers outside of the HMO network

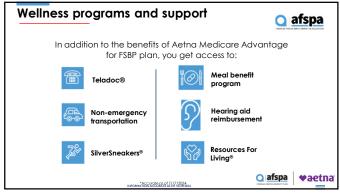
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Federal Employees MAP – Optional Value-Added Programs – depending on plan Meal delivery after hospital stay Transportation to medical appointments Teleheatth Fitness Benefits through Silver Sneakers Part B premium reduction through reimbursement Prescriptions (Part D) coverage optional or may be included in the Plan's MAP Hearing aids/Vision – glasses/contacts Must be enrolled in Medicare Parts A & B You won't have to suspend your FEHB plan as you would with a commercial MAP program Understand that Medicare Rules apply – it is NOT the same as regular FEHB plan rules OPT-IN – you must choose to enroll, but can change back anytime during the year

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FSBP - Aetna Medicare Advantage afspa (PPO) plan -2025 FSBP - Aetna Medicare Advantage designed for FSBP retirees with Medicare Parts A and B You'll also have: • \$900 per year Medicare Part B premium reduction for Keep the same \$0 cost sharing for deductibles, copayments and coinsurance that you have today. eligible members \bullet Added programs such as ${\bf SilverSneakers} \circledast$ and Healthy Home Visits Enroll to get enhanced benefits at an affordable price with no extra cost to • Prescription copays: as low as \$0 from preferred pharmacies and \$2 from standard pharmacies (MAX OOP \$2000) $\bullet \ Unlimited \ {\it chiropractor}, physical, occupational, and$ speech therapy visits • Enhanced Acupuncture and podiatry care • Nationwide providers (use any provider who is eligible to receive Medicare payment and accepts the plan) afspa ◆aetna One routine vision exam at \$0



FSBP - Aetna Medicare Advantage (PPO) plan Some Important Differences Some service require prior authorization INPT Hospital, OUTPT surgery, physical and massage therapy, etc. Massage Therapy benefits Must be Medically Necessary – provider completes a medical necessity review form Can use ASH in or out-of-network provider – but must accept both Medicare and Aetna Medicare Advantage Plan No coverage for massage for comfort or relaxation purposes Pharmacy Benefit is through CVS Health Review formulary list Customer Service handled by Aetna Retiree Service Center, NOT by AFSPA

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FEHB Plans with Medicare Prescription Drug Plan(PDP) – Launched in 2024 • Allows group plans to enroll members aged 65 and older in a Part D plan and take advantage of lower costs set within Part D plans • All eligible members age 65+ may be automatically enrolled; can opt-out if desired • Cost structure sharing can make the option appealing for members with lower copays and a lower out of pocket max for Rx drugs • CMS rules apply, including possible IRMAA premium add-on Only an enhancement to the Prescription Drug Benefit (5f) – members receive all same other benefits and programs in regular Plan design OPT-OUT – must opt-out if you want to stay with regular 5f benefits, Some plans allow you to opt back in at anytime; some make you wait until the next Open Season. DO THE MATH

FEHB-Express Scripts Medicare® Prescription Drug Plan (PDP) EGWP



- Changing from auto enrollment to opt-in
- Enrolls eligible members in Part D PDP EGWP
- \bullet Larger pharmacy network and greater flexibility for 90-day fills
- Copays equal to or less than FSBP High Option copays
- \bullet Greater savings may be available in 2025 due to changes in Part D out of pocket calculations

Only an enhancement to the Prescription Drug Benefit (5f) – members receive all same other benefits and programs in regular Plan design

DO THE MATH - May be subject to Part D IRMAA

NFORMATION ACCURATE AS OF 10/29/2024



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Medicare Prescription Drug Coverage in 2025



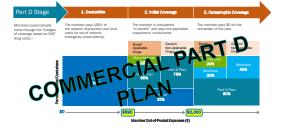
- Inflation Reduction Act provisions will lead to additional cost savings for those covered by Part D plans
- Continuation of provisions in place in 2023/2024 cap on insulin spending, \$0 cost sharing on certain vaccines, and \$0 cost sharing in catastrophic phase
- Redesign in 2025
 - □Capping annual out-of-pocket (OOP) costs for beneficiaries at \$2,000 Part D Spend □Change in how OOP is calculated
 - Removal of the Coverage Gap stage and ending the Coverage Gap Discount Program
 - □Implementation of new manufacturer discount program (MDP)
 - □New Medicare Prescription Payment Program (M3P)
- 2026 and beyond: Allowing Medicare to negotiate drug prices
- Implementing drug manufacturer inflationary rebates (penalties) in Medicare

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2025 Part D Standard Defined Benefit



What does this all mean? Greater \$avings for those covered by Part D plans

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Medicare and FEHB Ins and Outs Medicare does not provide coverage for spouses or children – no family enrollment FEHB is primary on spouse under age 65 who does not have Medicare See FEHB brochure, Section 9: COB with Medicare Primary Payor Chart

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Medicare and FEHB Tandem Couples Medicare Part B is an individual decision FEHB is primary on spouse who does not have Medicare If one spouse is active duty, might consider coverage under that plan Based on <u>current</u> employment Qualify for Special Enrollment Period when active spouse retires Might be higher premium compared to 2 Self Only plans but can delay Medicare Part B decision (and monthly premium) until active spouse retires.

TRICARE for Life (TFL) and the FEHB Medicare Part A and Part B enrollment is required in order to maintain TRICARE eligibility and use TRICARE for Life If you use TFL and continue your FEHB, TRICARE is normally the last payer after Medicare and FEHB You can suspend FEHB and use Medicare/TFL without losing the right to return to FEHB during a future Open Season Before suspending FEHB consider the following: -Do you spend most of your time overseas? -Do you use a specific benefit that is covered by your FEHB plan but not Medicare/TRICARE?

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What Happens if I DON'T Enroll in Medicare Part B? Same Benefits as before, and... Because of the 5 CFR § 890.905 law, your liability is limited By law, FFS plans must limit their payments for inpatient hospital care and physician care to those payments you would be entitled to if you had Medicare Your physician (Medicare participating & non-participating) and hospital cannot bill you for more than they could bill you if you had Medicare You are responsible for deductibles, coinsurance, or copayments under your FEHB Program Plan

What Happens if I DON'T Enroll in Medicare Part B?	afspa
 Opt-Out physicians, outpatient hospital care non-physician based care are NOT cover If using a in Network provider, discounts stistill have protection 	red by this law
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Enroll in Medicare B: Should I or Shouldn't I? afspa



- Consider the following in deciding to enroll or not in Medicare B
 - First Will you spend a great deal of time outside the U.S.?
 - **Second** What is your financial situation?
 - While you might be concerned about MAGI, consider cost of healthcare
 - With Medicare B virtually 100% covered
 - You must have Part B to enroll in a MAP

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Enroll in Medicare: Should I or Shouldn't I?



- Consider the following in deciding to enroll or not in Medicare B
 - □**Third** How is your health?
 - As we age we are more likely to seek medical care
 - Do your favorite doctors accept Medicare?
 - □ Fourth What is your tolerance for paperwork?
 - Electronic crossover from Medicare B to FEHB, hence virtually no paperwork



MEDICARE RESOURCES

- https://www.opm.gov/healthcare-insurance/healthcare/medicare/
- https://www.ssa.gov
- https://www.medicare.gov
- https://www.medicare.gov/sign-up-change-plans/index.html
- https://www.afspa.org/fsbp-and-medicare/



Contact your plan for their Medicare brochure

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MEDICARE RESOURCES



- FOCUS on MEDICARE Series
- ☐ Buzzsprout at <u>www.afspatalks.buzzsprout.com/</u>
- ☐ Videos at <u>www.youtube.com/afspacares</u>
- Medicare and the FEHB
- Medicare, Tricare and the FEHB (featuring Dr. Christine Hunter, USN, Ret.)
- Federal Medicare Advantage Plans
- FSBP Express Scripts Medicare® Prescription Drug Plan(PDP)

All other episodes can be found at www.afspa.org/podcast

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