

Kaiser Permanente Members (outside California) and Cigna Preferred with Rx Members (Phoenix, Arizona)

For those enrolled in Kaiser Permanente outside California (Kaiser – Colorado, Kaiser – Georgia, Kaiser – Hawaii, Kaiser – Oregon, Kaiser – Washington), plan changes and rates are determined by the Kaiser Permanente region in which you reside. You will receive a separate mailing from LACERA.

Those enrolled in Cigna Preferred with Rx, Phoenix, Arizona will also receive a separate mailing from LACERA.

IMPORTANT MEDICARE PART D NOTICE

If you are a **Non-Medicare Eligible Retiree**, included in this packet is your **Medicare Part D Notice of Creditable Coverage (NOCC)**. (Medicare Eligible Retirees and Dependents: This notice does not apply to you.)

- *What it is:* An official statement that your LACERA-administered medical plan provides you with prescription drug coverage that is, on average, as good as or better than the coverage offered by the Medicare Part D model plan.
- *What to do with it:* Read it and keep it in a safe place.
- *Why it is important:* If you later decide to enroll in a Medicare Part D plan outside of the LACERA-administered plans, showing your NOCC will prevent you from paying a penalty for late enrollment in Medicare Part D.
- *If you misplace it:* You may download a copy of the NOCC from LACERA’s website at www.lacera.com/healthcare/pdf/new_retiree_packet/nocc.pdf, or contact LACERA’s Retiree Healthcare Division at (800) 786-6464 and press 1, or (626) 564-6132, or email LACERA at healthcare@lacera.com.

Two Important Things to Remember!

- You should not enroll in another Medicare Part D plan. Please consult with LACERA first if you are thinking of enrolling in another plan.
- If you are enrolled in a Medicare Part D plan not offered through LACERA, please contact LACERA immediately. The Centers for Medicare & Medicaid Services (CMS) will not allow you to be enrolled in two prescription drug plans, and your coverage with LACERA may be jeopardized.

PRIVACY NOTICE REMINDER

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 requires health plans to comply with privacy rules. These rules are intended to protect your personal health information from being inappropriately used and disclosed. The rules also give you additional rights concerning control of your own healthcare information.

This Plan’s HIPAA Privacy Notice explains how the group health plan uses and discloses your personal health information. You are provided a copy of this Notice when you enroll in the Plan. You can get a copy of the HIPAA Privacy Notice (LACERA Retiree Healthcare) from the LACERA website at www.lacera.com/healthcare/healthcare.html.



Retiree Healthcare Benefits UPDATE

2022

June 2022

This *Benefits Update* provides information about:

- Retiree Healthcare Premium rates that will become effective July 1, 2022.
- Changes to LACERA’s Retiree Healthcare Benefits Program for the 2022 – 2023 plan year.

If you have any questions about the information in this *Benefits Update*, please contact LACERA’s Retiree Healthcare Division at (800) 786-6464 and press 1, or (626) 564-6132, or by email at healthcare@lacera.com.

Do You Need to Take Action?

Your current LACERA-administered healthcare coverage will continue for the upcoming plan year unless you actively make changes. **You do not have to take any action unless you want to make changes to your current LACERA-administered healthcare coverage.**

Premium Rate Changes for 2022 – 2023

On July 1, 2022, overall premiums will increase by an average of 1.0%. This means that some plans and coverage levels will experience a higher increase than the average, while others will experience a lower increase. Please refer to the enclosed *Monthly Premium Rates Booklet* for your 2022 – 2023 rates. **If you are enrolled in Kaiser Permanente outside of California or Cigna Preferred with Rx (Phoenix, Arizona), you will receive a separate mailing from LACERA.**

Plan Changes for 2022 – 2023

Changes to your benefits for the 2022 – 2023 plan year are minor. This means you will continue to have access to most of the same benefits and levels of coverage you have now. There are, however, a few changes that will take effect July 1, 2022. Some of these changes are described in this document.

The information below summarizes the key changes to LACERA’s medical plans effective July 1, 2022. This is not intended to be a comprehensive list of all 2022 – 2023 plan changes. For more details, see your healthcare plan documents, or contact your carrier.

Anthem Blue Cross Prudent Buyer Plan and Plans I, II and III

For all Anthem plans, no changes beyond mandated contractual changes have been made to the plan design. For more details, see your Anthem healthcare plan documents or LACERA Summary of Benefits book. You may also contact Anthem Blue Cross to request one.

Cigna Preferred with Rx Plan (Maricopa, Pinal, and Pima Counties in AZ)

■ Medical

- Telehealth for Speech Therapy: \$0 copay
- Removed referral requirement to see specialist
- Added Annual Physical as a Supplemental Benefit
- Increased Hearing Aid Allowance to \$700 per ear, per device every three years

■ Prescription Drugs

- Initial Coverage Limit: \$4,430 (once you reach this limit, you continue to pay your cost share until you reach the Catastrophic Phase)
- Catastrophic Phase Begins: \$7,050 in true out-of-pocket costs (TrOOP)
- Standard Catastrophic Member Cost Share — once you reach the Catastrophic Phase, you pay:
 - Generic Drugs (including brand-name drugs treated as generic): greater of \$3.95 or 5%
 - All Other Drugs: greater of \$9.85 or 5%

Cigna Network Model Plan

Please note that no changes beyond mandated contractual changes have been made to the plan design. For more details, see your Cigna healthcare plan documents or LACERA Summary of Benefits book. You may also contact Cigna to request one.

Cigna Dental/Vision Plans

Please note that no mandated contractual changes have been made to the dental and vision plans.

Kaiser Permanente Senior Advantage

■ Medical

- Supplemental benefits with meals and transportation
- Silver&Fit Exercise & Healthy Aging program

Contact Kaiser at (877) 750-2746 for information on these programs.

Please note that no changes beyond mandated contractual changes have been made to the plan design. For more details, see your Kaiser Permanente plan documents or LACERA Summary of Benefits book. You may also contact Kaiser to request one.

Kaiser Permanente HMO

Please note that no changes beyond mandated contractual changes have been made to the plan design. For more details, see your Kaiser Permanente plan documents or LACERA Summary of Benefits book. You may also contact Kaiser to request one.

UnitedHealthcare® Group Medicare Advantage

Benefit changes include:

■ Medical

- Renew Active: Renew Active® is replacing Silver Sneakers. It is the gold standard in Medicare fitness programs for body and mind and provides you with a free gym membership and access to a nationwide network of gyms and fitness locations for \$0. To learn more about Renew Active or to see if your gym is participating in this program, visit UHCRenewActive.com
- UnitedHealthcare Healthy at Home: With UnitedHealthcare Healthy at Home, you are eligible for benefits up to 30 days following discharge from all inpatient and skilled nursing facilities for \$0. You’ll receive benefits like 28 home-delivered meals, 12 one-way rides to the pharmacy and medically related appointments, and 6 hours of in-home personal care. A referral is required

- PERS: The Personal Emergency Response System, provided by Philips Lifeline, is an emergency response service for a \$0 copay. Worn as a wristband or pendant, all you need to do is push a help button

For more information about these programs, contact the customer service number on the back of your UHC MA ID card.

■ Prescription Drugs

- Initial Coverage Limit: \$4,430 (once you reach this limit, you continue to pay your cost share until you reach the Catastrophic Phase)
- Catastrophic Phase Begins: \$7,050 in true out-of-pocket costs (TrOOP)
- Standard Catastrophic Member Cost Share — once you reach the Catastrophic Phase, you pay:
 - Generic Drugs (including brand-name drugs treated as generic): greater of \$3.95 or 5%
 - All Other Drugs: greater of \$9.85 or 5%

UnitedHealthcare HMO

Please note that no changes beyond mandated contractual changes have been made to the plan design. For more details, see your UnitedHealthcare plan documents or LACERA Summary of Benefits book. You may also contact UnitedHealthcare to request one.

SCAN Health Plan

Benefit changes include:

■ Abridge

- A smartphone app that helps remind you of your doctor’s advice, record doctors’ visits, and receive an interactive transcript of the medical parts of the conversation
- \$0 copay

For more information about Abridge, go to abridge.com/scan, or email scansupport@abridge.com, or call SCAN Member Services at (800) 559-3500.

■ Headspace

- A personal guide for hundreds of exercises to reduce stress, increase focus, and improve sleep
- \$0 copay

To join Headspace, go to headspace.com/scanhealthplan. If you need help with Headspace, you can send an email to teamsupport@headspace.com or call SCAN Member Services at (800) 559-3500.

■ Caregiver Training

- Virtual and in-person skill training and support for caregivers. The 4-week series is designed to fit into a busy schedule and is offered several times throughout the year
- \$0 copay

To access this benefit, call SCAN Member Services at (800) 559-3500.

■ Home-Delivered Meals

- Up to 28 days of fully-prepared meals delivered to the homes of members with chronic conditions
- \$0 copay

To access Home-Delivered Meals, call SCAN Member Services at (800) 559-3500.

■ Prescription Drugs

- 3-Month Supply extended to 100 days, both Retail and Mail Order
- Catastrophic Phase Begins: \$7,050 in true out-of-pocket costs (TrOOP)
- Standard Catastrophic Member Cost Share — once you reach the Catastrophic Phase, you pay:
 - Generic Drugs: greater of \$3.95 or 5%
 - Brand-Name Drugs: greater of \$9.85 or 5%

SCAN Health Plan is growing and has expanded the service area in California and two new States:

■ California

- Alameda and San Mateo Counties

■ Two New States (Arizona and Nevada)

- SCAN Desert Health Plan (Arizona - Maricopa, Pima, and Pinal Counties)
- SCAN Health Plan Nevada (Clark County)

For questions regarding enrollment, contact LACERA.