EMPLOYER GROUP MEDICARE PLANS

2018

1-800-851-3379, ext. 8024
TTY: 711
HealthAlliance.org/Group-Medicare
The Next Step in Benefit Offerings

With the baby boomer population comprising about 25 percent of the workforce, chances are you have a group of employees who are nearing retirement. Navigating Medicare and retirement health care options can be very confusing.

Group Medicare plans from Health Alliance Medicare can help you support your employees during this very important time in their life. It will help you retain talent and show appreciation for those who have given you their best years.

These plans can be offered at no cost to the employer and can even help the employer save money.
Coverage You Know and Trust

If you’ve worked with Health Alliance before, you know that member satisfaction is our top priority. We are constantly seeking to partner with providers that offer high quality, high value care and enhance our plan offerings.

With our group Medicare plans, we have numerous stock options to choose from. We can also build custom plans for groups of 25 or more.

Helpful, Personal Customer Service

When members call us, they’ll speak with a friendly and knowledgeable Health Alliance Medicare representative in Central Illinois. Our customer service representatives are available Monday through Friday, 8 a.m.–8 p.m. local time.

Large Provider Network

When you choose Health Alliance Medicare for your retirees, you’re giving them access to our network of doctors, hospitals and other healthcare professionals who can provide top-notch care and services. Members can call us to request a provider directory or visit HealthAlliance.org/Group-Medicare for a full provider list.

Formulary

The Medicare Part D Formulary is a list of drugs covered by Health Alliance Medicare. Generally, we only cover drugs listed in the formulary.

Visit HealthAlliance.org/Group-Medicare to view our formulary.

Perks

We offer a host of perks at no extra cost to help members save money and get healthy. See the “Perks” section for more information.
About Our Group Medicare Plans

Group Medicare plans from Health Alliance Medicare can help you support your employees once they become Medicare-primary. It will help you retain talent and show appreciation for those who have given you their best years.

How it Works

Employer Contribution toward Premium
You can contribute anything from $0 to the full amount toward enrollee premiums. If retirees within the organization qualify for different levels of employer contribution, you can establish those levels.

Billing Options
We can do a group bill or bill members individually.

Dedicated Employer Group
Client Consultant
You have a single point of contact for any questions about group Medicare benefits. This representative can help with every aspect of your plan.

Low-Income Subsidy
Members may qualify for extra help from the federal government with paying their monthly premium and prescription drug copayments. If retirees qualify for assistance, the premium billed for those members will be reduced by the amount of assistance they receive. This can vary from member to member, and you must pass the subsidy to the member’s portion of the premium. State help may also be available for certain members who qualify.

Eligibility
Retirees with Medicare Parts A and B are eligible for group coverage. If your group has fewer than 20 total employees, active employees ages 65 and over may also be eligible. Underwriting isn’t required. Members must continue to pay their Medicare Part B premium if not otherwise paid for under Medicare or by another third party.

We Make it Easy

Plans that Fit
We work with you to find the plan that fits the needs of your organization. There are several stock plans to choose from, and we can custom-build a plan for groups of 25 or more. We also have plan options for employers with retirees who live outside the state where your business is located. And all our plans help reduce FASB/GASB liabilities and expenditures.

Less Paperwork
We administer the plan, which means less paperwork for you.

Member Materials
We send plan materials, including an ID card and policy (called an Evidence of Coverage) to all new members and upon renewal. Members on a Medicare plan receive a monthly Explanation of Benefits detailing monthly and year-to-date medical expenses. Members on a Medicare plan with pharmacy coverage receive a monthly Explanation of Benefits detailing monthly and year-to-date drug expenses.

No Enrollment Lock-In
Retirees can enroll in Health Alliance Medicare at any time during the year. They are not limited to the Annual Election Period required for those on individual Medicare plans.
Comprehensive Medicare Advantage Plans

HMO
- Can be sold to employers based in **Iowa, Illinois, Indiana and Ohio** with at least 51% of eligible employees residing in Medicare Advantage-licensed counties
- Most cost-effective
- Medical and prescription drug coverage in one plan
- $0 Tier 1 preferred generic drugs at Walgreens and other preferred cost-sharing pharmacies (Rx plan members only)
- Members designate a primary care provider to manage their care
- Access to emergency and urgent care worldwide
- No in-network deductible
- Health and savings perks included

HMO-POS
- Can be sold to employers based in **Illinois** with at least 51% of eligible employees residing in Medicare Advantage-licensed counties
- Combines the best aspects of HMO and PPO plans
- Rx plans include medical and prescription drug coverage in one plan
- $0 Tier 1 preferred generic drugs at Walgreens and other preferred cost-sharing pharmacies (Rx plan members only)
- Members designate a primary care provider to manage their care
- Members have the freedom to go out-of-network but save money by staying in-network
- Access to emergency and urgent care worldwide
- No in-network deductible
- Health and savings perks included

PPO
- Can be sold to employers based in **Iowa** with at least 51% of eligible employees residing in Medicare Advantage-licensed counties
- $0 Tier 1 preferred generic drugs at Walgreens and other preferred cost-sharing pharmacies (Rx plan members only)
- Ability to see out-of-network providers
- Access to emergency and urgent care worldwide
- No in-network deductible
- Health and savings perks included

Help Members Bridge the Coverage Gap
Retirees can’t purchase prescription coverage through the coverage gap on their own. They can only get it through an employer plan. Some of our plans give your retirees this key coverage.

Note: Health Alliance Medicare Supplement members without prescription drug coverage can get a discount at the pharmacy when they present their ID card.

Plan offerings differ depending on your service area; please refer to the plan inserts in the back of this brochure for specific plan information.
**Perks**

**Health and Wellness Programs**
For HMO, HMO-POS and PPO plans

**Discounts**
To help our members be their best and save money, we offer valuable discounts on:

- Prescription drugs
- Fitness club memberships
- Weight-loss programs
- Hearing aids

To learn more, go to HealthAlliance.org/Health-and-Wellness.

**Assist America®**
When Health Alliance Medicare members are more than 100 miles from home, Assist America can help with:

- Guaranteed hospital admission
- Prescription assistance, if they forget or lose a prescription medication
- Transportation for a loved one to join the member if hospitalized for more than seven days
- Return of mortal remains, in the unfortunate event that a member passes away while traveling

**Health and Wellness**
As part of our disease management programs, we send members newsletters, brochures and reminders about important condition-specific topics like asthma, COPD, diabetes, blood pressure and cholesterol, as well as help to quit smoking.

Visit the Health and Wellness section of HealthAlliance.org for more information on disease management programs, weight-loss programs and fitness discounts.

**Wellness Rewards**
Members have the opportunity to earn a $50 gift card for doing specified wellness activities based on a point system.

**Be Healthy**
To encourage our members to seek preventive care, we cover 100 percent of charges for an annual exam (in-network for HMO, HMO-POS and PPO members) and medically appropriate screenings.

**Care Management**
We support our members through every step of care with these programs, included in their coverage at no extra cost.

- **Health coaching** for encouragement and support in making a healthy lifestyle change.
- **Case management** when members have a critical medical need or a complex condition and need help navigating the healthcare system. We have doctors, nurses, social workers and others who are plugged in to both the health plan and healthcare providers.
- **Care transitions** for a smooth adjustment from hospital to home and any stays in between.
- **Medication management** for help taking medications safely and getting the expected results.

These services are part of what makes Health Alliance more than just healthcare coverage. We’re part of your retirees’ healthcare system and can help them in more ways than you might expect.

**Hearing Benefit**
For greater savings than the discount provides, the TruHearing Select benefit offers Medicare Advantage members one routine hearing exam ($45 copay) and lowered rates on up to two TruHearing® Flyte® hearing aids per year.

**Drug Programs**
For all members with drug coverage

**$0 Copay at Preferred Pharmacies**
Members with prescription coverage can get Tier 1 prescription drugs at Walgreens, Williams Bros. Pharmacy in Olney, IL., and other preferred cost-sharing network pharmacies for $0. Tier 1 features the most-used drugs on our formulary. Members can continue to receive drugs from other network pharmacies. Members must use an in-network pharmacy to get covered drugs unless it’s an emergency.

**Retail 90**
With our Retail 90* program, members can get a 90-day supply of their medications at preferred pharmacies (like Walgreens) for only two copays.

*90-day supplies are available at other non-preferred pharmacies for 2.5 copays.

**Medication Therapy Management**
This program helps members who take multiple medications use them safely and effectively.
DISCRIMINATION IS AGAINST THE LAW

Health Alliance Medicare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Health Alliance Medicare does not exclude people or treat them differently because of race, color, national origin, age, disability or sex. Health Alliance Medicare:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact customer service.

If you believe that Health Alliance Medicare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Health Alliance Medicare, Member Services, 301 S. Vine Street, Urbana, IL 61801, telephone: 1-800-965-4022 TTY: 711, fax: 217-337-3425, MemberServices@healthalliance.org. You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Member Services is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, TTY: 1-800-537-7697.


ATENCIÓN: Si habla Español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame 1-800-965-4022 (TTY: 711).

注意：如果你講中文，語言協助服務，免費的，都可以給你。呼叫 1-800-965-4022 (TTY: 711)。


Chú ý: Nếu bạn nói Tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ, miễn phí, có sẵn cho bạn. Gọi 1-800-965-4022 (TTY: 711).

주의 : 당신이한국어, 무료 언어 지원 서비스를 말하는 경우 사용할 수 있습니다. 1-800-965-4022 전화 (TTY: 711).

ВНИМАНИЕ: Если вы говорите русский, вставки услуги языковой помощи, бесплатно, доступны для вас. Вызов 1-800-965-4022 (TTY: 711).


Wenn Sie Deutsch sprechen, Sprachassistentendienste sind kostenlos, zur Verfügung. Anruf 1-800-965-4022 (TTY: 711).

ATTENTION: Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez 1-800-965-4022 (TTY: 711).

चित्रण: तभी पालन तो गुजरस्ती, भाषा सहाय सेवाएं, मुक्त, तमाम मात्रे उपलब्ध हैं। कॉल 1-800-965-4022 (TTY: 711).

注意：あなたは、日本語、無料で言語支援サービスを、話す場合は、あなたに利用可能です。1-800-965-4022コール（TTY: 711）。


УВАГА: Якщо ви говорите український, вставки послуги мовної допомоги, безкоштовно, доступні для вас. Виклик 1-800-965-4022 (TTY: 711).

ATTENZIONE: Se si parla italiano, servizi di assistenza linguistica, a titolo gratuito, sono a vostra disposizione. Chiamare 1-800-965-4022 (TTY: 711).