FAQs for Retirees
Aon Retiree Health Exchange | 2018 Open Enrollment
University System of Georgia

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For USG Retirees Currently Enrolled in Coverage Through the Aon Retiree Health Exchange

Do I need to re-enroll for coverage through the Aon Retiree Health Exchange each year?
No. If you do not want to make changes for next year, no action is required. If you are satisfied with the coverage you have today and continue to pay your monthly premiums, your coverage will continue into the next plan year.

In rare cases, if your plan will not be available in the future, you will be contacted by the Aon Retiree Health Exchange and your insurance company by mail to help you select new coverage before the time your current coverage ends.

What should I do if I want different coverage for next year?
If you would like to change your coverage for next year, you will need to call the Aon Retiree Health Exchange at 1-866-212-5052 to request an appointment with your dedicated Benefits Advisor during Medicare Open Enrollment, October 15 through December 7. (If the individual who was previously your dedicated Benefits Advisor is no longer available to help you, you’ll be aligned with a new Benefits Advisor who has access to all of your information.)

Should I review my coverage each year?
If you are satisfied with the coverage you have today and continue to pay your monthly premiums, your coverage will continue into the next year. However, if your finances and/or medical needs have changed, please contact your dedicated Benefits Advisor at the Aon Retiree Health Exchange at 1-866-212-5052 or visit retiree.aon.com/usg for your available options.

Will my premiums change?
- Medicare Advantage Plans and Part D Plans are subject to premium changes annually on January 1.
- Medicare Supplement (Medigap) Plans are subject to premium changes that can take place at any time during the year. Premiums for this type of plan can be affected by the age you are when you choose the plan, your current age, inflation and other factors. For more information on how plans are priced, visit the Medicare website.
If your premium changes, you will be notified in advance by your insurance company. If you have concerns or would like to explore coverage options, please contact an Aon Retiree Health Exchange Benefits Advisor.

What happens if my insurance company notifies me that my plan will no longer be available? Will it affect my HRA?
In the rare cases when a plan will not be available in the future, you will be contacted by your insurance company and also by the Aon Retiree Health Exchange to help you select new coverage before the time your current coverage ends. You can call your dedicated Benefits Advisor at the Aon Retiree Health Exchange at 1-866-212-5052 for help in selecting a new plan. Your HRA will not be affected, as long as you select new healthcare coverage through the Aon Retiree Health Exchange.

USG Contribution to the Health Reimbursement Account (HRA)

How much will USG contribute to each eligible retiree’s HRA in 2018?
The 2018 USG contribution to the HRA will be $2,736.
How did USG determine the 2018 HRA contribution?
Based on market analysis and a review of the premiums of the plans in which USG retirees are enrolled, USG determined that it will keep the 2018 HRA contribution the same as in 2017.

Will the USG contribution to the HRA increase from year to year?
Every year, USG will review the individual insurance market and the average premiums of the plans in which USG retirees are enrolled to determine if the annual HRA contribution should be adjusted to account for inflation and average premium costs.

Do I need to take any action for my HRA auto-reimbursements to continue?
No. Please rest assured that your HRA auto-reimbursement will continue into 2018 automatically. If your premiums change, your insurance company will contact the Aon Retiree Health Exchange to adjust your reimbursement as soon as administratively possible, in no more than four to six weeks. However, if you need to start the process sooner, you are welcome to contact the Aon Retiree Health Exchange at 1-866-212-5052.

If, at any point, your banking or personal information changes, please notify the Aon Retiree Health Exchange.

How can I find a list of expenses that are eligible for reimbursement from my HRA?
- Visit retiree.aon.com/USG to log in to their Aon Retiree Health Exchange account
- Select Manage my HRA
- Select Take Action, then Check Eligible Health Care Expenses

How long do I have to submit claims for 2017?
For as long as you participate in the HRA, there is no deadline to submit claims.

If I have HRA funds remaining at the end of the year, will I lose them?
No. Your HRA balance rolls over year to year. There is no “use it or lose it” rule.

Catastrophic HRA

Can USG help if I have extremely high prescription costs?
Retirees with an extremely high usage of prescription drugs might enter the Medicare Part D catastrophic coverage phase. To help these retirees, USG has created a special program called the Catastrophic HRA. In 2017 and 2018, USG will reimburse retirees for the full amount of any Medicare Part D copayment and coinsurance expenses incurred in the catastrophic phase of coverage for the remainder of the year.

If you or your covered spouse enters the catastrophic coverage phase, you will be notified by your Medicare Part D insurance company through your Medicare Part D Monthly Prescription Drug Summary Statement. You should:
- Save that statement.
- Contact your dedicated Benefits Advisor at the Aon Retiree Health Exchange immediately to access Catastrophic HRA support.
For USG Retirees Enrolling for the First Time in Coverage Through the Aon Retiree Health Exchange

How will my medical coverage change after I retire from USG?
Instead of continuing healthcare coverage through the USG group healthcare plan, if you are a Medicare-eligible retiree, you can choose individual healthcare insurance through the Aon Retiree Health Exchange.

The Aon Retiree Health Exchange is staffed with licensed, certified and dedicated Benefits Advisors who will work one-on-one with you, at no cost to you. These dedicated Benefits Advisors will help you explore all your healthcare plan options, help you enroll in the one that best meets your needs and then provide ongoing support after enrollment. You are welcome to include family members or others in your discussions with your dedicated Benefits Advisor.

Is USG going to contribute toward the cost of my retiree healthcare?
Yes. USG will contribute to a Health Reimbursement Account (HRA) — an account that USG will fund to help reimburse you for healthcare premiums and other eligible healthcare and pharmacy expenses.

To be eligible for this contribution, you must enroll in coverage through the Aon Retiree Health Exchange during your enrollment period. Information about the HRA and the contribution USG will make on your behalf will be included in the Enrollment Kit that will be mailed to your home.

**Important:**
While you will not be required to use the Aon Retiree Health Exchange to obtain coverage, USG will not provide you with an HRA contribution unless you enroll in a supplemental healthcare and/or prescription drug plan through the Aon Retiree Health Exchange.

If I do not enroll (or do not remain enrolled) in an exchange plan, can my dependents remain enrolled in USG healthcare plans?
No. If you are eligible to enroll in exchange plans and choose not to enroll, or you disenroll from an exchange plan, any dependents still enrolled in the USG healthcare plan will be disenrolled. You will receive notification from USG of the disenrollment.

What’s the process for paying healthcare premiums?
You will be responsible for paying premiums directly to your new insurance company. To ensure that you don’t miss a payment and risk losing coverage, USG recommends that you take advantage of automatic payment features, like direct debit, through your new insurer. Your dedicated Benefits Advisor can help you prepare to pay your premiums.

Will my HRA pay the insurance company directly?
No. You will be responsible for paying your premiums directly to your insurance company. In order to keep your reimbursement from being taxed, the IRS requires that you pay expenses out of your own pocket first. You may then reimburse yourself from your HRA. Your dedicated Benefits Advisor can help you understand how your HRA works and how you can use it to reimburse yourself for premiums and eligible healthcare expenses.
How do I arrange to talk with my dedicated Benefits Advisor through the Aon Retiree Health Exchange?
Your first telephone meeting with your dedicated Benefits Advisor will be scheduled for you in advance. You’ll find your meeting date and time in the Enrollment Kit you’ll receive by mail. You must confirm — or reschedule — your appointment either online or by calling the Aon Retiree Health Exchange at 1-866-212-5052 from 9 a.m. to 9 p.m. Eastern time, Monday through Friday.

Please Note: The Centers for Medicare and Medicaid Services (CMS) will not allow the Aon Retiree Health Exchange to keep this appointment unless it’s confirmed in advance.

During your appointment, your dedicated Benefits Advisor will ask questions to get to know your healthcare needs and coverage preferences. Using this information, your dedicated Benefits Advisor will help you explore plans that best meet your needs and fit your budget, based on the insurance options available in your area. After you choose a plan, your dedicated Benefits Advisor will help you complete an application and other required forms while answering any questions and concerns you may have.

Will the Benefits Advisors charge a fee for helping me?
No. There is no cost to you for this service. Aon Retiree Health Exchange Benefits Advisors are objective and receive no special compensation to enroll you in a specific plan.

Do I have to speak with a dedicated Benefits Advisor to get healthcare coverage?
While you will be able to go online to complete nearly all of the necessary steps to obtain coverage through the Aon Retiree Health Exchange, you will still need to speak briefly with your dedicated Benefits Advisor by phone to confirm your enrollment election(s).

CMS governs the activities of the Aon Retiree Health Exchange. CMS requires that each retiree who enrolls through the Aon Retiree Health Exchange (whether online or by phone) listen to and confirm a series of questions related to enrollment and provide a voice signature as the final step.

What happens if my spouse and/or children are not eligible for Medicare?
If you have a spouse and/or children currently covered under the USG group healthcare plan who are not eligible for Medicare, they’ll continue to be covered under the USG plan until they lose eligibility under the USG plan or become eligible for Medicare.

What do I do if I have an issue with my new coverage after I've enrolled?
If you enrolled through the Aon Retiree Health Exchange, you can continue to get help in several ways. If you can’t get answers to questions about your plan or resolve issues directly with your insurance company, you can call your dedicated Benefits Advisor.

More complex issues can be directed to a team of professional Advocates who are also available through the Aon Retiree Health Exchange. Advocates have experience in a variety of Medicare insurance areas, including claims, billing procedures, appeals and even challenges getting appointments with specialists. Your dedicated Benefits Advisor can connect you with an Advocate. This service is available at no cost to you.
I'm retired from USG and over age 65, but I am covered as an active employee through another employer. Will I be able to enroll through the Aon Retiree Health Exchange? You should contact the Aon Retiree Health Exchange to learn more about your coverage options. Every situation is individual, and it’s important for you to select the right level and source of coverage for your current needs.