



Welcome to Kaiser Permanente - 2023

Medicare Basics - 101

VEBA – Post 65 Retiree Plan

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Understanding the basics of Medicare



Who can join Medicare?

You're eligible to join Medicare if:



You're 65 or older



You have end-stage renal (kidney) disease (ESRD)



You're under 65, but live with a disability

- Must be eligible for Social Security disability
- Requires a 2-year waiting period



You have amyotrophic lateral sclerosis (ALS)



U.S. citizen or a permanent legal resident who has lived in the United States for at least five years



What is Medicare?

- Medicare is a federally funded health insurance program.
- Medicare was established in 1965.
- Medicare is administered by the Centers for Medicare & Medicaid Services (CMS).
- Medicare includes 4 parts:



PART A
Hospital Insurance



PART B
Medical Insurance

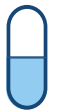
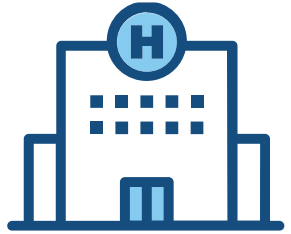


PART D
Prescription
Drug Coverage



PART C
(Medicare Advantage)
Includes Part A, B
and usually D

Original Medicare



Part A: Hospital Insurance

What it does:

- Gives you coverage for inpatient hospital care
- Also covers skilled nursing care, hospice care, and home health care

What it costs:

- Most won't have to pay a premium for Part A. To make sure you qualify for premium-free Part A, contact Social Security.
- If you worked less than 10 years, there is a monthly premium up to \$506*, your monthly premium is set by a Medicare formula.

* Amount is for 2023



Part B: Medical Insurance

What it does:

- Helps cover doctors' and other health care providers' services, like lab and radiology
- Outpatient care, durable medical equipment, dialysis, and some preventive care services are also covered

What it costs:

- Your monthly premium is usually deducted from your Social Security or Railroad Retirement Board check.
- Late enrollment penalty (LEP):
 - Your premium increases 10% for each 12-month period that you decline coverage.
 - Not a one-time penalty **but continues throughout enrollment.**
 - Not imposed if you continue to work for — and get your health coverage from — an employer or trust fund of 20 or more.
(You have up to 8 months after your employment ends to enroll.)



Part B: Medical Insurance

2023 Medicare Part B Monthly Premiums*

Your yearly income†		You pay	Your yearly income†		You pay
Single-Standard‡ Married couple-standard‡	\$97,000 or less \$194,000 or less	\$164.90‡	If you're married but file a tax return separately from your spouse		
Single Married couple	\$97,001 - \$123,000 \$194,001 - \$296,000	\$230.80	\$97,000 – or less Standard‡	\$164.90‡	
Single Married couple	\$123,001 - \$153,000 \$296,001 - \$306,000	\$329.70	\$97,001 – less than \$403,000	\$527.50	
Single Married couple	\$153,001 - \$183,000 \$306,001 - \$366,000	\$428.60	Greater than or equal to \$403,000	\$560.50	
Single Married couple	\$183,001 - \$500,000 \$366,001 - \$750,000	\$527.50			
Single Married couple	Above \$500,000 Above \$750,001	\$560.50			

†Modified adjusted gross income as reported on your 2021 IRS tax return.
‡You will pay this Standard amount if you 1) enroll in Part B for the first time in 2023, 2) do not get Social Security benefits, 3) are directly billed for your Part B premiums. See [medicare.gov](https://www.medicare.gov) for complete details.

*Note: The above dollar amounts are for 2023 and may change in 2024.



Part A & B: Enrolling in Medicare When First Eligible

Initial Enrollment Period

- If you're already getting benefits from Social Security, you'll be automatically enrolled in both Part A and Part B starting the first day of the month you turn 65.
- If you **do not** get benefits from Social Security, you'll need to contact Social Security.
- You can enroll over a 7-month period, which starts 3 months before your 65th birthday, known as the **Initial Enrollment Period**.
- You may be able to enroll online at **[socialsecurity.gov](https://www.socialsecurity.gov)**.



Note: Completing the application form and submitting it doesn't automatically enroll you in Medicare Part B. Social Security must first determine if you're eligible.



Part A & B: Late Enrollment Into Medicare

General Enrollment Period

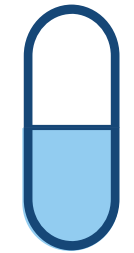
- If you do not sign up for Part A and Part B when you're first eligible, you can sign up between January 1 and March 31 each year. Beginning January 1, 2023, when you sign up during this period, your coverage starts the first day of the month after you sign up.



Special Enrollment Period

- Triggered by certain events, such as loss of employment or retirement, that allow you to enroll in Medicare or change plans.

Note: Completing the application form and submitting it doesn't automatically enroll you in Medicare Part B. Social Security must first determine if you're eligible.



Part D: Prescription Drug Coverage

What it does:

- Covers outpatient prescription drugs

To enroll:

- You have two ways of enrolling in Part D:
 1. Through an individual or employer/union Group Medicare Advantage (Part C) plan that includes Part D prescription drug coverage.
 2. A stand-alone Prescription Drug Plan that offers prescription drug coverage only.

Unlike with Parts A and B, you **sign up for Part D directly** with your plan. Part D is not directly offered by Medicare or Social Security.



Part D: Prescription Drug Coverage

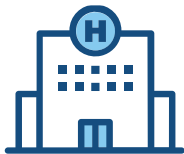
Medicare Part D Income Related Monthly Adjustment Amount (IRMAA)

The Part D higher-income premium is in addition to the annual Part B premium adjustment and is determined according to formulas set by federal law.

Based on your 2021 yearly income, your 2023 Part D monthly cost is:

File individual tax return	File joint tax return	In 2023, you pay monthly
\$97,000 or less	\$194,000 or less	No Part D IRMAA Premium
\$97,001 to \$123,000	\$194,001 to \$296,000	\$12.20
\$123,001 to \$153,000	\$296,001 to \$306,000	\$31.50
\$153,001 to \$183,000	\$306,001 to \$366,000	\$50.70
\$183,001 to \$500,000	\$366,001 to \$750,000	\$70.00
above \$500,000	above \$750,001	\$76.40

These amounts may change yearly.



Part C: Medicare Advantage

What it does:

- Combines your benefits from Parts A, B, and sometimes D (prescription drug coverage) in a single plan and are an alternative to Original Medicare*
- Services under a network of providers that you must use for care

What it costs:

- Medicare pays an amount for your coverage each month to private health plans.
- Some plans have additional monthly premiums; in many plans, you pay a copay for covered services.
- If you choose an out-of-network provider, you'll be financially responsible, except in the case of an emergency or urgent care.**

*Except care for some clinical research and hospice care (Original Medicare covers hospice care even if you're in a Medicare Advantage Plan).

**Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

Medicare's Extra Help Program: Low-Income Subsidy

- For Medicare beneficiaries with limited income and resources
- Provides extra help with Part D premiums and outpatient drug copays
 - Degree of help depends on income and resources
- Additional facts about extra help:
 - Apply at Social Security or state Medicaid office
 - Administered by your plan, for CMS
 - You must be enrolled in a Part D plan to get help



High Medicare Star Quality Ratings You Can Depend On*

Kaiser Permanente region	Star rating*
California	★★★★★
Colorado	★★★★★
Georgia	★★★★★
Hawaii	★★★★★
Mid-Atlantic States (MD, VA, D.C.)	★★★★★
Northwest (OR, SW Washington)	★★★★
Kaiser Permanente Washington	★★★★☆

Check out our highly rated* 2023 Medicare health plans at kp.org/medicarestars.

*Every year, Medicare evaluates plans based on a 5-star rating system.



POST 65 GROUP RETIREMENT

The California Schools VEBA offers the following group Post 65 Group Retirement Plans to its members.

WHO CAN JOIN?

- You must be a Medicare-eligible retiree or dependent who is no longer eligible for the district retiree plan - or choose it instead of the district plan.
- You must be entitled to Medicare Part A and enrolled in Medicare Part B.
- You must live within the CMS-approved Kaiser Permanente or UnitedHealthcare service area.

Benefits	UnitedHealthcare Group Medicare Advantage (HMO) Post 65 Retiree Plan	Kaiser Permanente Senior Advantage Plan
Out-of-Pocket Maximum	\$1,500	\$1,000
PCP/Specialist Office Visits	\$15 copay	\$15 copay
Emergency Room	\$50 copay	\$50 copay
Ambulance	\$50 copay	\$50 copay
Hospital Fee/Admission	\$200 copay	\$200 copay
Prescription Drugs	\$10 Preferred Generic \$25 Preferred Brand \$50 Non-Preferred/Specialty (up to 30-day retail supply) \$20 Preferred Generic \$50 Preferred Brand Name \$100 Non-Preferred/Specialty (up to 90-day supply via mail)	\$10 Generic \$25 Brand (up to 100-day supply)
Annual Hearing Exam	No charge	No charge
Hearing Aid (every 36 months)	Plan pays up to \$500	Plan pays up to \$1,000 (per aid)
Annual Vision Exam	\$15 copay	\$15 copay
Eyewear Allowance (every 24 months)	Plan pays up to \$70 for eyewear; \$105 for contact lenses	Plan pays up to \$150 for either eyeglasses or contact lenses
Annual Screenings	No charge	No charge
COST PER MONTH	\$379	\$198
If you are enrolled in one of these Advantage Plans, voluntary dental HMO and PPO coverages are available as an option at the additional monthly cost shown here.	DeltaCare USA HMO \$15 OR Delta Dental PPO \$71	DeltaCare USA HMO \$15 OR Delta Dental PPO \$71

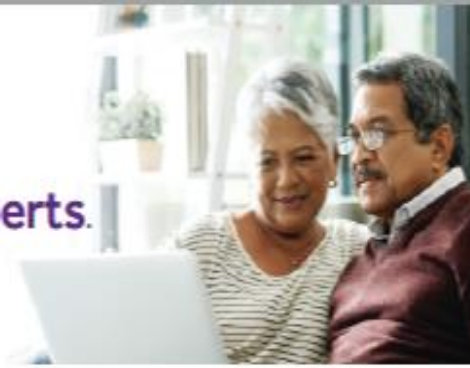
For More Information, Contact VEBA Post 65 Member Services at
619-961-2047 or email post65inquiries@mcgregorinc.com
(in person appointments unavailable until further notice)

Prepared by Gallagher Benefit Services, Inc. on behalf of California Schools VEBA

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. The policies themselves must be read for these details. The intent of this document is to provide you with general information about your employee benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be directed to your Human Resources/Benefits Department.



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Services available to you or a family member:



Expert Medical Opinion

Get confirmation on a diagnosis or help deciding on a treatment option.



Critical Case Support

Receive expert medical guidance if you've been admitted into the hospital.



Find a Doctor

Get help finding a doctor who specializes in your specific condition.



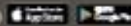
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What is Unique About Being a VEBA Member?

Being a VEBA Member, you are part of a community that focuses and supports your overall health and well-being. As a Member, you gain complete access to the VEBA Resource Center (VRC), which offers an extensive range of resources and events that target Mental Health Support and Education, Movement, Stress Reduction, Nutrition, and more! You also have the option to receive personal guidance from one of our Care Navigators: holistic nurses that will help develop a customized plan for you and your journey. Our community provides innovation, support, and encouragement to overcome any obstacles you may face so you can live the best version of yourself.



What is California Schools VEBA?

California Schools VEBA (VEBA) is a 501c(9) non-profit trust that delivers high quality, affordable and accessible health care for education, municipal and public agency employees, serving more than 65 participating employers and over 150,000 members throughout Southern California. VEBA believes health is universal and we are committed to decreasing barriers of achieving optimal health because we believe everyone deserves access to quality and equitable health care.

Stay connected with us!



Sign up to receive updates from the VEBA Resource Center and never miss out on the latest news, upcoming events, well-being resources and more!
vebaresourcecenter.com/newsletter



Your Guide to the VEBA Resource Center





Welcome to the VEBA Resource Center!

We are excited to introduce you to the incredible resources the VRC has to offer you! The VRC was launched in 2019 and has become a hub for education employees to advocate for their own health and well-being ever since. This is a quick guide to who we are and what we offer. We are thrilled to have you as part of our community!

vebaresourcecenter.com

In-Person Offerings

We are excited to be offering in-person classes again at our 5520 Ruffin Road building for our VEBA Members! We are currently offering:

- Care Navigation
- Open Gym
- No-Cost Childcare when at the VRC
- Auricular (Ear) Acupuncture
- Mind & Body Classes
- Movement Classes
- Cooking & Nutrition Classes

Virtual Offerings

VEBA Members and non-members have access to our online resources at vebaresourcecenter.com These resources include:

- Virtual Classes
- Everything under the "Resources" tab of the menu
- Hundreds of well-being videos on our YouTube channel

Why VEBA?

VEBA's top priority is empowering our Members to become advocates for your own well-being. We know we cannot approach health care as a "one-size-fits-all" approach, so we work to build an integrated health care system that delivers on your personal needs at an affordable cost. This customized approach results in better care for our Members, higher quality health care and lower costs for their employers. We offer a suite of wraparound services to ensure that you, as a Member, are engaged, empowered, and an advocate for your own well-being.



CALIFORNIA SCHOOLS
VEBA

Contact Information

If you have questions about the VEBA Post 65 Plan – Please contact the VEBA Member Services Team at 619-961-2047 or send an email to: post65inquiries@mcgregorinc.com

Kaiser Permanente Member Services: 1-800-443-0815 (TTY 711)

7 days a week, 8 a.m. to 8 p.m.

Social Security: 1-800-772-1213 (TTY 1-800-325-0778)

Monday through Friday, 8 a.m. to 7 p.m.

Medicare: 1-800-MEDICARE (1-800-633-4227) TTY 1-877-486-2048

24 hours a day, 7 days a week.



Questions?

In California, Hawaii, and Washington, Kaiser Permanente is an HMO plan with a Medicare contract. In Colorado, Oregon, Southwest Washington, Georgia, Maryland, Virginia, and the District of Columbia, Kaiser Permanente is an HMO and HMO-POS plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.