



# HOP NEWS

## Your Guide For Retiree Health Care Coverage

**At the Health Options Program,** we're devoted to connecting our members and their dependents with reliable, dependable service and information.

The Health Options Program, sponsored by the Pennsylvania Public School Employees' Retirement System (PERS), provides comprehensive medical, prescription drug options, and dental and vision coverage exclusively to our retirees and their families. Visit us at [discoverHOPbenefits.com](https://discoverHOPbenefits.com) to learn about the many advantages of the Health Options Program.

Most members of the Health Options Program enroll when they turn 65 and become eligible for Medicare. If you didn't enroll at that time, you may have another opportunity if you experience a Qualifying Event (see page 2). However, don't wait too long. Certain time limits apply.

### ***The Option Selection Period***

*Currently enrolled members are going through the Option Selection Period. It's their annual opportunity to review health care coverage and make changes for the coming year, if needed.*

## When You Can Join

If you didn't join the Health Options Program when you turned 65, you may have another opportunity when you experience a Qualifying Event.

You experience a Qualifying Event when:

- You retire or involuntarily lose health care coverage under your school employer's health plan. Coverage under your school employer's health plan includes any COBRA continuation coverage you may elect under that school employer's plan.
- You involuntarily lose health care coverage under a non-school employer's health plan (which includes any COBRA continuation coverage you may elect under that non-school employer's health plan).
- There is a change in your family status (including divorce, the death of a spouse, addition of a dependent through birth, adoption, or marriage, or a dependent loses eligibility).
- You reach age 65 or become eligible for Medicare.
- You become eligible for Premium Assistance due to a change in legislation.
- Your current plan terminates, or you move out of your current plan's service area.

Depending on individual circumstances, Qualifying Events may apply independently to you, your spouse, and/or your dependents. For example, if your spouse turns age 65 and becomes eligible for Medicare, he or she can choose to enroll in the Health Options Program, whether or not you also enroll.

Contact the HOP Administration Unit at 1-800-773-7725 for details.

## Your Guide For Enrolling

If you experience a Qualifying Event, use this list to prepare for making your 2024 coverage decisions. Keep in mind that you can only join the Health Options Program for the first time or add new dependents if you experience a Qualifying Event (including turning 65). Visit [HOPbenefits.com](https://www.hopbenefits.com), or call 1-800-773-7725 for information about Qualifying Events.

- ✓ **Consider overall costs.** When calculating your overall costs, be sure to include the monthly premium and deductible, as well as what it will cost when you need care (copays and coinsurance).
- ✓ **Review what's covered by each plan.** Consider your health care needs and how any benefit changes may affect your coverage for next year.
- ✓ **Check the formulary.** The formulary is the list of medications covered by a prescription drug plan. The list can change as medications are added or removed. You can use the online Find a Drug tool on [HOPbenefits.com](https://www.hopbenefits.com) for the most current version of the formulary.
- ✓ **The first person to retire determines enrollment options.** If you are married and your spouse is not currently enrolled, consider when they might retire. Retirees and dependents must be enrolled in the same plan options, which is determined by who enrolls first. Therefore, if your spouse will become eligible within the next year, but after you make your decision, you may want to consider what options will work for both of you. Otherwise, you won't have the opportunity to change coverage (for both of you) until next fall's Option Selection Period.

## Our Members Are in the Driver's Seat

The Member Dashboard is a secure area of the [HOPbenefits.com](https://www.hopbenefits.com) website that makes it easy for our members to manage their plans. For example, registered members can:

- Get an ID card
- View medical claims information
- Review benefit coverage
- Pay their bill online
- Connect with the HOP Administration Unit
- Access a Care Kit—online, self-care guides on a variety of health topics

Many of the vendors who administer our plans also have tools or apps for on-the-go convenience. See below.

### Benefit Info on the Go

Our vendors offer apps for a smartphone (or tablet, in some cases), so no matter where your our members travel, they'll have easy access to all their benefits information.



OptumRx

View all covered medications in one place, check the status of orders, manage auto-refill of prescriptions, and access an ID card.



MetLife US  
App

Access coverage details and claims, find a dentist, read reviews, and book an appointment (if available). Get personalized estimates for dental procedures, and access an ID card.



EyeMed

Check benefits, find an eye doctor, and view claims.



SilverSneakers  
GO

Get fit, stay active, and develop healthy exercise habits with this app. Use the fitness location and class finder to access virtual and in-person classes; select from 200+ SilverSneakers on-demand fitness and wellness videos.

# Need Directions? Attend an Information Session

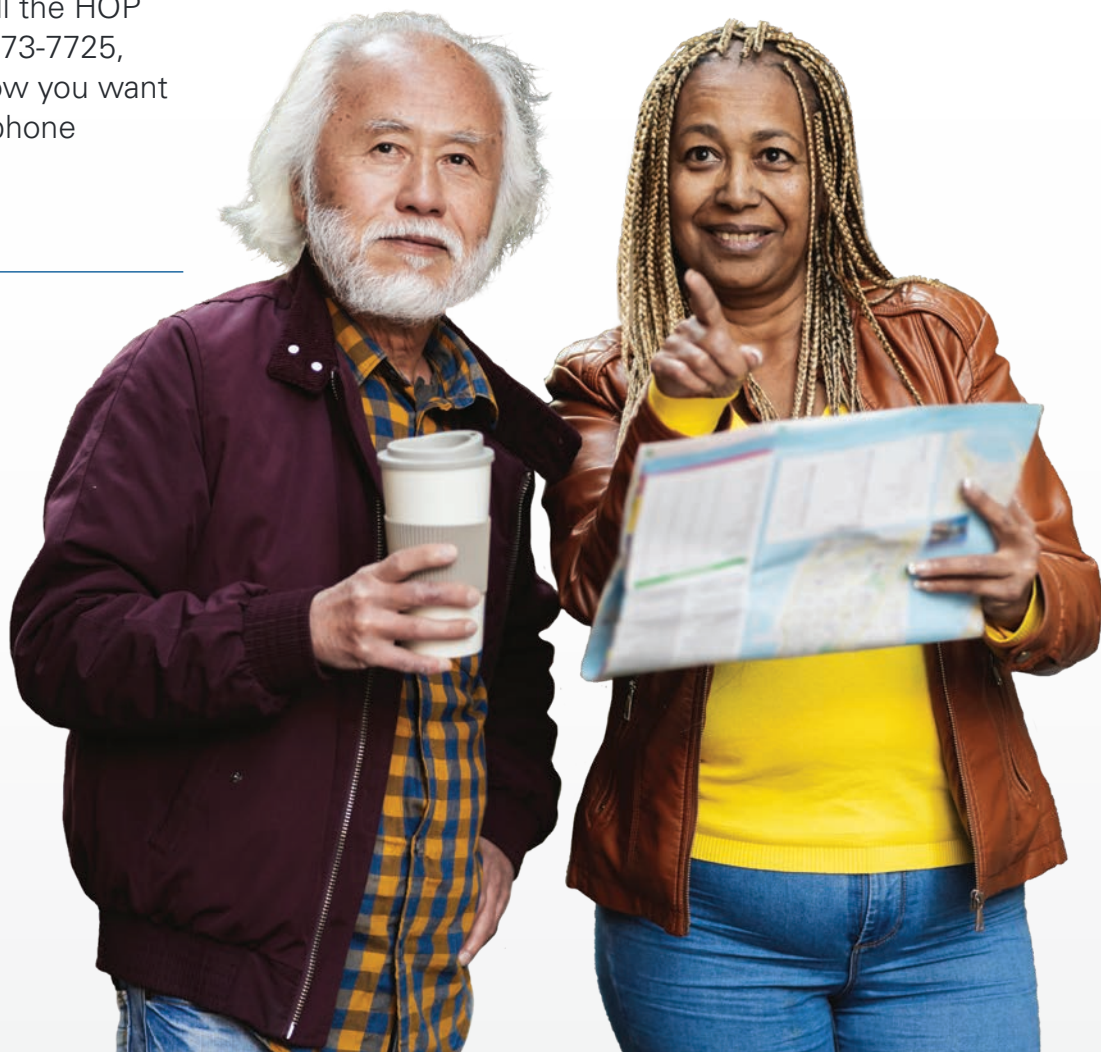
## Individual consultations

To schedule a 30-minute telephone appointment (not a group meeting) during the months of October and November, call the HOP Administration Unit at 1-800-773-7725, and let the representative know you want to schedule an individual telephone consultation.

## Online webinars

The fall webinars will be held in October and November. The schedule is posted to the **Information Sessions** page (under **About the Health Options Program**) on [HOPbenefits.com](https://www.hopbenefits.com).

Or you can call the HOP Administration Unit to ask about the schedule. Recorded webinars are available if you are unable to attend a live session.



## 2023 Medicare Star Rating ★★☆☆☆

Each year, Medicare evaluates prescription drug plans and awards a star rating to each plan based on performance. The Health Options Program's prescription drug plans received a 4.5-star rating for 2023, indicating that the program is highly rated in comparison to other prescription drug plans nationwide.

## If Your School District Terminates Your Medical Coverage

Pennsylvania public school employers are required by law to provide retirees who have 30 years of service or meet certain other conditions the option to continue their school plan's coverage at their own expense until they become eligible for Medicare. Some school districts and other school employers also offer Medicare Supplement plans for retirees after they become eligible for Medicare. If you're eligible for Premium Assistance and remain in a school-sponsored plan, you'll save up to \$100 a month on any premiums you pay for your coverage.

Unfortunately, given today's economic challenges, many school districts are terminating their Medicare Supplement programs. If this happens to you, you must enroll in another plan approved for Premium Assistance; otherwise, you will lose the advantage of this special discount.

If your school district terminates its Medicare Supplement plan, and you and your eligible dependents enroll in the Health Options Program by the deadline, you will continue to have uninterrupted medical coverage, and your Premium Assistance will continue. If you enroll by the deadline, you'll avoid the Medicare Part D late enrollment penalty. This penalty is an amount added to your monthly premiums on an ongoing basis. It is applied if you have a continuous 63-day period without Medicare prescription drug coverage.

Generally, when a school district is considering terminating coverage, the Health Options Program is notified in advance. The Health Options Program then automatically provides information to all affected retirees about how to make the transition from the school district plan to any of the options available under the Health Options Program. However, if your school district ends its Medicare Supplement plan and you do not receive this information, call the HOP Administration Unit (1-800-773-7725), and they will explain the process and make sure you receive all the information you need.



*The medical plans in the Health Options Program may be the only plans available to you that are approved for Premium Assistance.*

HOP Administration Unit  
P.O. Box 1764  
Lancaster, PA 17608-1764

# Join Our TEAM

## Have a Question?

If You Have a Question About	Please Call	Or Go Online
<b>Enrollment in the Health Options Program</b> <b>Health Options Program in general</b>	<b>HOP Administration Unit</b> <b>1-800-PSERS25 (1-800-773-7725)</b> TTY: <b>1-800-498-5428</b> From outside the U.S.: <b>+1 717-305-7388</b> 8:00 a.m. to 8:00 p.m. ET, weekdays	<b>HOPbenefits.com</b>
<b>Premium Assistance</b>	<b>Premium Assistance</b> <b>1-866-483-5509</b> 8:00 a.m. to 8:00 p.m. ET, weekdays	
<b>Retirement</b>	<b>PSERS</b> <b>1-888-PSERS4U (1-888-773-7748)</b> 7:30 a.m. to 5:00 p.m. ET, weekdays	<b>psers.pa.gov</b>
<b>Medicare</b>	<b>Medicare</b> <b>1-800-MEDICARE (1-800-633-4227)</b>	<b>medicare.gov</b>