



HOP NEWS

Take Your Benefits With You

Are you on the move? Not a problem. You'll always have access to your benefits.

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

That's why, when it comes to managing your health care, finding information about your benefits, getting answers to questions, or talking to someone to make sure you're enrolled in the plan that fits your needs, we've got you covered! This issue focuses on the convenient tools available to you that make your benefits easy to use.

As we gear up for the Option Selection Period, take a look at all the material we provide, on page 3, to inform you of your benefits and choices for next year.

Option Selection Period for 2024 will take place in October. Take the time to review the materials, and decide whether you want to make any changes to your Health Options Program coverage for 2024.

You're 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 to manage your plan. Just visit [HOPbenefits.com/members](https://www.hopbenefits.com/members), and log in to:

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

If you are not registered, you'll need to create an account. Note: The option to pay your premium online is only available if your premium is larger than your pension. Otherwise, your premium is deducted automatically from your pension.

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 your smartphone (or tablet, in some cases), so no matter where your travels take you, you'll have easy access to all your benefits information. Visit the App Store or Google Play, and search for the app you want.



OptumRx

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



EyeMed

Check your 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.

Get Ready to Go: Option Selection Period for Medical and Rx!

The Option Selection Period is your opportunity to change your medical plan and/or prescription drug option under the Health Options Program for the coming year.

In October, you will receive a packet of information mailed to your home that explains all your choices for 2024 and any changes to your current coverage. Take the time to evaluate the materials, and decide whether you want to make any changes to your Health Options Program coverage for 2024.

Unless you notify us during the Option Selection Period, your current medical and/or prescription drug or dental and vision coverage will continue in 2024. Depending on your current coverage and the options available where you live, you may be able to switch your coverage to another option.

Your Road Map for the Option Selection Period

Here's what you'll receive from us when the Option Selection Period begins:

- A **Personalized Statement** that shows your current coverage and your 2024 options and premiums based on where you live
- A Health Options Program **Change Form** to use if you want to change options effective January 1, 2024
- A survey card with questions about our communications

Every member enrolled in a Medicare Rx Option will also receive the following (married couples may receive two sets), as required by Medicare:

- A 2024 **Abridged Prescription Drug Formulary**, listing the most frequently prescribed medications (The Comprehensive Formulary will be posted to [HOPbenefits.com](https://www.hopbenefits.com).)
- A 2024 **Annual Notice of Change**, which provides an overview of the changes to your current Medicare Rx Option

Going Electronic for 2024

The Centers for Medicare and Medicaid Services (CMS) has ruled that plans can provide certain documents electronically instead of mailing printed copies. Starting with the 2024 Option Selection Period, the following materials will be available on [HOPbenefits.com](https://www.hopbenefits.com) in mid-October.

- The 2024 **Evidence of Coverage**, which contains information about your Medicare prescription drug plan, your rights and responsibilities, what is covered, and what you pay as a member of the plan.

- The **Pricing & Pharmacy Lookup Tool** lists the network pharmacies. You can use this tool to find a network pharmacy near you.

Print by request. If you would like a printed copy of either document, call the HOP Administration Unit (1-800-773-7725) and one will be mailed to you. Let the representative know if it is a one-time request or you want to make it permanent.

Keep Moving! Register for SilverSneakers®

If you are enrolled in the HOP Medical Plan or Pre-65 Medical Plan, you have access to SilverSneakers at no additional cost. The Option Selection Period is your opportunity to enroll in one of these plans if you want SilverSneakers.

SilverSneakers provides access to a nationwide network of participating locations, SilverSneakers LIVE online classes and workshops taught by instructors trained in senior fitness, SilverSneakers GO mobile app, and the SilverSneakers On-Demand video library. Our members are moving with SilverSneakers.

“ Before, I was only walking. Now, I’m doing cardio and weightlifting and have gotten stronger. I like that, with virtual classes, I don’t have to be on camera, and I can do the classes anywhere, even my kitchen. But there’s still a sense of community—a Q&A chat with the instructor, and group chat before or after class. ”

Important note: If you are enrolled in a Medicare Advantage plan, contact the insurance company directly to see what wellness programs are available to you. Always consult with your physician before starting a physical activity program.

SilverSneakers is a registered trademark of Tivity Health, Inc. © 2023 Tivity Health, Inc. All rights reserved.

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.

Need Directions? Attend an Information Session

Getting information about the Health Options Program is easy. Do you need one-on-one assistance, or would you prefer to attend a presentation online? It’s your choice.

One-on-one consultations

Schedule a 30-minute telephone appointment (not a group meeting) with a staff member of the Health Options Program. Just call the HOP Administration Unit at 1-800-773-7725, and tell the representative you want to schedule an individual telephone consultation.

Online webinars

Attend a webinar online during the months of September and October. The schedule and webinar links are posted to the **Information Sessions page** on [HOPbenefits.com](https://www.hopbenefits.com). Recorded webinars are also available if you are unable to attend a live session.



Is Your Spouse Almost 65?

If you are married and your spouse is not currently enrolled, consider when they might become eligible—for example, when they turn age 65. Retirees and dependents must be enrolled in the same plan, which is determined by who enrolls first.

Therefore, if your spouse will become eligible within the next year but after you make your decision this Option Selection Period, you may want to consider what options will work for both of you.

For example, if you elect the HOP Medical Plan, when your spouse retires, he or she must also elect the HOP Medical Plan (if Medicare-eligible) or the HOP Pre-65 Medical Plan (if not eligible for Medicare). You won't have the opportunity to change coverage (for both of you) until next fall's Option Selection Period.

Coverage for your spouse

- If your spouse is also a PSERS retiree, you may each enroll individually in any option.
- If your spouse is NOT a PSERS retiree and is Medicare-eligible, he or she must enroll in the **same plan** that you enroll in.
- If your spouse is not eligible for Medicare, he or she must enroll in the **same type of plan** that you enroll in (the HOP Pre-65 Medical Plan if you enroll in the HOP Medical, Value Medical Plan, or a Pre-65 managed care plan offered by the same insurance company, if you enroll in a Medicare Advantage plan).

Call the HOP Administration Unit at 1-800-773-7725 with any questions and for more information about enrolling in the Health Options Program.

Premium Assistance Annual Verification of Payments

Premium Assistance is a reimbursement of a premium paid by an eligible retiree to an approved health plan. It is added to a retiree's retirement benefit and is not subject to federal or state income tax. In order to preserve this tax-favored treatment, PSERS is required to obtain verification that retirees who receive Premium Assistance actually have out-of-pocket premium expenses from approved plans.

Each year, PSERS asks school employers to verify that Premium Assistance recipients have paid premiums each month that equal or exceed the amount of the Premium Assistance benefit. If the school employer is unable to do so, PSERS must collect unverified benefits from the retiree.

PSERS sends a letter to all retirees who have received overpayments. The letter requests that overpayments be returned and explains how they can be returned, including through lump-sum or monthly deductions.

Remember to call PSERS

If you are receiving Premium Assistance and your out-of-pocket premium expense changes or stops, it is your responsibility to notify PSERS. You must also notify PSERS if you have terminated your health coverage with your former school employer and have not enrolled in the Health Options Program.



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

Option Selection Period Starts in October 2023

Have a Question?

If You Have a Question About	Please Call	Or Go Online
Health Options Program enrollment or eligibility HOP Medical Plan, Value Medical Plan, or HOP Pre-65 Medical Plan benefits or claims	HOP Administration Unit 1-800-PSERS25 (1-800-773-7725) TTY: 1-800-498-5428 From outside the U.S.: +1 717-305-7388 8:00 a.m. to 8:00 p.m. ET, weekdays	HOPbenefits.com
Prescription drugs (retail or mail order) under the Enhanced, Basic, or Value Medicare Rx Option or the HOP Pre-65 Medical Plan	OptumRx 1-888-239-1301 TTY/TDD: 1-800-498-5428 Available 24/7	HOPbenefits.com
Medicare Advantage or Managed Care plan benefits, claims, or prescription drugs	Please call the plan directly.	
MetLife Dental and EyeMed Vision Option	MetLife 1-855-700-7997 8:00 a.m. to 11:00 p.m. ET, weekdays EyeMed 1-855-663-7444 7:30 a.m. to 11:00 p.m. ET, weekdays 8:00 a.m. to 11:00 p.m. ET, Saturdays 11:00 a.m. to 8:00 p.m. ET, Sundays	MetLife Dental and EyeMed Vision Option page on HOPbenefits.com
Premium Assistance	Premium Assistance 1-866-483-5509 8:00 a.m. to 8:00 p.m. ET, weekdays	
Retirement	PSERS 1-888-PSERS4U (1-888-773-7748) 7:30 a.m. to 5:00 p.m. ET, weekdays	psers.pa.gov