

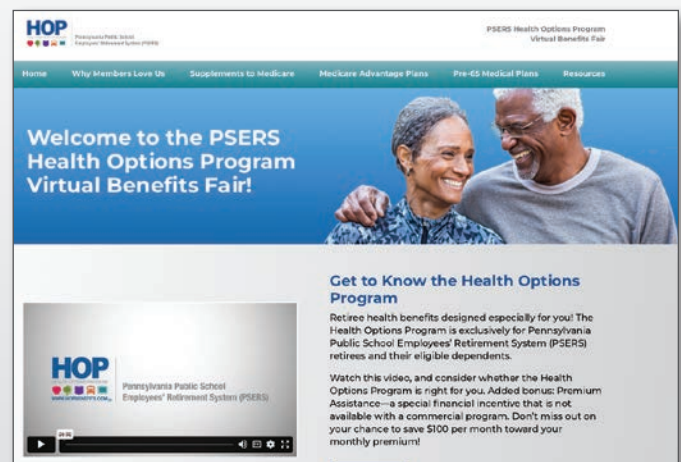


# HOP NEWS

## Get to Know the Health Options Program

Under the Health Options Program, you have access to comprehensive coverage before and after you become eligible for Medicare. The best way to get to know all the benefits and programs is to visit the virtual benefits fair at [discoverHOPbenefits.com](https://discoverHOPbenefits.com). You'll find helpful information from all our benefits partners, including videos, decision support tools, and more.

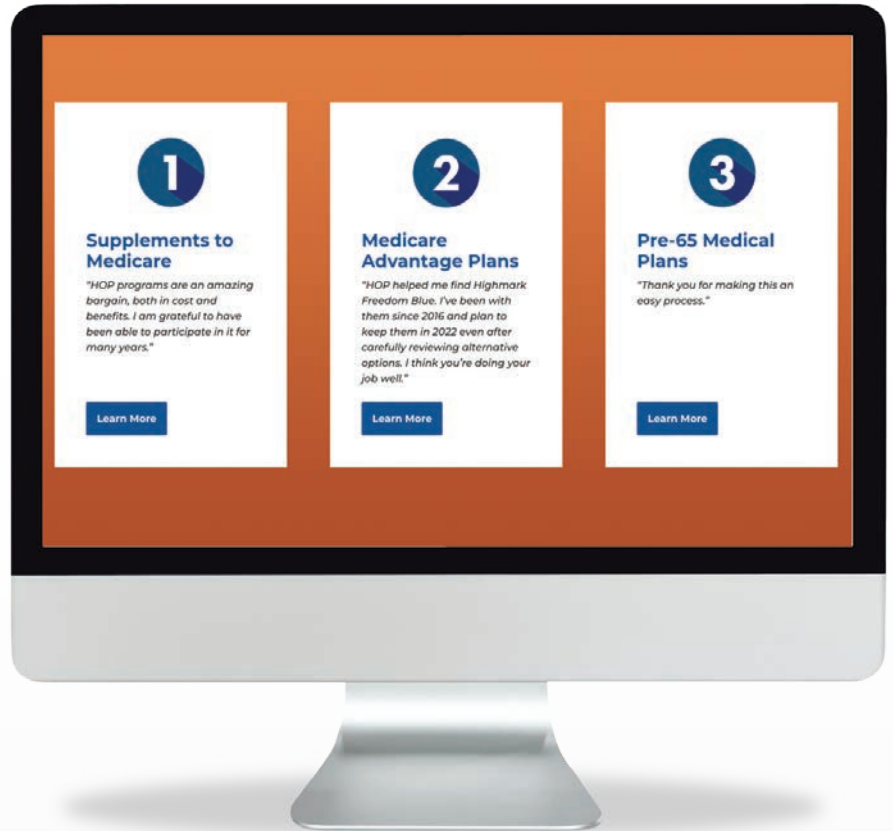
You may also find it helpful to hear what enrolled members have to say about their benefits and the materials they receive from the Plan. Read more from the member perspective on page 3.



# Retiree Health Benefits Designed Especially for You!

The Health Options Program is exclusively for Pennsylvania Public School Employees' Retirement System (PERS) retirees and their eligible dependents.

When you enroll in the Health Options Program, you have the option to enroll in a plan that supplements Original Medicare. Or you can enroll in a plan that replaces Original Medicare entirely (Medicare Advantage plan). There are also pre-65, prescription drug, dental, and vision coverage options. Visit the virtual benefits fair at [discoverHOPbenefits.com](https://discoverHOPbenefits.com) for more details.



## What's available to you?

If you are Medicare-eligible:

- Medicare Supplement plans—the HOP Medical Plan and the Value Medical Plan
- Medicare prescription drug plans (Medicare Part D coverage)—Enhanced Medicare Rx Option, Basic Medicare Rx Option, and Value Medicare Rx Option
- Medicare Advantage plans—medical and prescription drug plans offered by Highmark, Aetna, Independence Blue Cross, Capital Blue Cross, and UPMC
- MetLife Dental and EyeMed Vision Option

If you are not eligible for Medicare:

- HOP Pre-65 Medical Plan
- Pre-65 managed care plans

## The Results Are In

Last fall, we included a survey in the materials our members received at the start of the Option Selection Period. The survey asked members to rate the materials.

Similar to past years, the Health Options Program materials received high scores from our members:

- 90% rated the materials as 8 or higher on a scale of 1 (not satisfied) to 10 (very satisfied).
- 86% felt they received the right amount of information—not too much or too little.
- 88% rated the personalized statement's understandability as 8 or higher on a scale of 1 (not understandable) to 10 (very understandable).

Over 88% of members felt they had the right number of coverage options for medical, prescription drug, dental, and vision coverage.

Thank you to the more than 6,000 members who responded. We work hard to meet your needs and provide useful and relevant materials. We hope you continue to find the materials informative and helpful.



## In Their Own Words

Our members have a lot to say about their benefits, and we value their feedback. This year, 1,466 members provided handwritten comments on the survey cards—and we read them all. Here's what some of you had to say:

*“Thanks for your help. At age 90 I'm well cared for by HOP and others.”*

*“I'm so happy with HOP. Your rates are fair. Your staff is very knowledgeable and helpful. Even though I am out of state, NY, I've never had a problem with my insurance being accepted.”*

*“The customer service personnel are always pleasant, courteous, and very knowledgeable! I'm very satisfied when I telephone for assistance.”*

*“Thank you for succinct, easy-to-compare information on increasingly complicated health care, especially prescription drugs.”*

*“I am so thankful to get SilverSneakers on Zoom. Thank you!”*

# The Health Options Program Advantage

Here are a few things that set the Health Options Program apart from other commercial plans:

- **Substantial premium subsidy.** If you meet the requirements for Premium Assistance, you can receive up to \$100 a month reimbursement.
- **Age 65 discount.** If you enroll in the HOP Medical Plan at age 65, you will pay a discounted premium.
- **Choice.** You can choose between Medicare Supplement plans and Medicare Advantage plans, as well as Medicare prescription drug (Part D) plans, and a dental and vision option.

## Tools to Help You Decide

Most members of the Health Options Program enroll when they turn 65 and become eligible for Medicare. At 65, unless you're still working, Medicare becomes your primary coverage for hospital and medical expenses. However, many people feel that the basic level of Medicare (called Original Medicare) provided by the government is not sufficient to meet their needs.

These tools can help you determine which plan is best for you:

- The **Find a Plan tool** is an interactive decision guide that asks a series of questions to help narrow down your options. Give it a try today at the virtual benefits fair at [discoverHOPbenefits.com](https://discoverHOPbenefits.com).
- Your **personalized statement** and plan materials will show you what plans are available to you, what the plans cover, and how much they cost. See page 5.
- **Information sessions** are virtual meetings that provide an overview of the options and provide an opportunity for you to ask questions along the way. See page 5.



## The Health Options Program Has You Covered

The Medicare Rx Options available through the Health Options Program are designed to cover the majority of the cost of members' prescription medications.

For example, in 2022, the average cost per brand-name prescription was \$597; however, the average member cost share was much less, at \$136.

## Are You Almost 65?

If you're a PSERS retiree about to turn age 65, we take a number of steps to make sure you understand how the Health Options Program works.

We send you a package of information from four to nine months before your 65th birthday. We mail these twice a year—in the fall for people turning age 65 during the first six months of the following year and in the spring for people turning age 65 in the second half of the year. The package contains a description of the medical, prescription drug, and dental and vision benefits available under the Health Options Program—plus a personalized statement that has information specific to you, including your monthly premiums for all your coverage options.

### You're invited!

We also conduct online webinars for retirees approaching age 65. *Registration is required.* The summer webinars will be held in July and August. The schedule and registration links are 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 at 1-800-773-7725 to register.

In addition to all the regular features available on the website, if you register, you'll find a personalized statement with all the same information as the printed statement you receive in the mail. Plus, if you misplace or want another copy of your statement, a printer-friendly version is available.



## 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 lump-sum or monthly deductions.

*Don't know if you're eligible for Premium Assistance? Call 1-866-483-5509 for help.*

## 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.

If you are unsure about your eligibility for Premium Assistance, call the Premium Assistance Unit at 1-866-483-5509, and ask a customer service representative to check your retirement benefit records.



HEALTH OPTIONS PROGRAM



WWW.HOPBENEFITS.COM®

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

# Get to Know Us

## 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>