Need help?

For specific health insurance questions:

- Call Blue Cross and Blue Shield of Vermont (BCBSVT) at 888-222-7886.
- Create an online Express Scripts account at www.express-scripts.com.
- Consult with a Northeast Delta Dental rep at 888-832-5700.

For general information about UVM

- Visit www.uvm.edu/hrs
- e-Mail HRSInfo@uvm.edu, or
- Call 802-656-3150

Join us at the Benefits Fair! Thursday, Nov. 5 in Memorial Lounge

Visit our retiree resource page:

www.uvm.edu/hrs/retired

2015 UVM Open Enrollment
For calendar year 2016

Retiree Benefits

Take time now to review your benefits. The information that follows may suggest adjustments for you to consider and it will inform you of cost and coverage changes that will begin on January 1, 2016.

Changes you can make during Open Enrollment:

- Change between base and high-option dental coverage
- Add an eligible dependent
- Change a life insurance beneficiary
- Enroll in coverage (medical, dental) if you’d opted out

Important Reminder

If you missed a 20-day deadline to add a dependent to your medical/dental plan during the year, Open Enrollment is your opportunity to make any changes: November 10 - December 4, 2015.

Open Enrollment Changes Effective January 1, 2016

Medical and Dental Insurance

VHP medical premiums for will increase for calendar year 2016. JCarveout and Medicomp III will not increase for calendar year 2016.

High-Option dental premiums will not increase for calendar year 2016.

Medical Premium Rate Increases

January 1, 2016

VHP............................. 5.8 %
J Carve-Out................... 0.0%
Medicomp III................ 0.0%

High-Option Dental Monthly Rates*

Retiree.......................... $7.25
Retiree and Spouse ...........$14.50
Retiree and Child(ren) ..........$14.50
Family............................$21.75
Turning 65? Time to enroll in Medicare

When you turn 65, you must enroll in Medicare Parts A, B, and D. Part A provides hospitalization coverage at no cost. Part B becomes your primary medical insurance and requires a monthly income-sensitive premium. Part D is drug coverage and requires a monthly income-sensitive premium as well.

Your UVM BCBSJCarveout serves as supplemental insurance to Part B. Included with this insurance is the UVM BCBS MedicareRx Part D program to cover your drug needs; this fulfills your obligation to Medicare to enroll in Part D.

Prior to your 65th birthday, we will remind you of your option to enroll in the UVM BCBS supplemental insurance to Part B and the Part D drug plan.

Please note that your enrollment in any Part D plan may require a premium payable to Medicare for those who are high-income earners. Contact the Social Security Administration to be fully informed as you approach age 65.

Medicare Part D Drug Coverage

Effective January 1, 2015, UVM began providing prescription drug coverage for those retirees covered by Medicare through a partnership with BCBSVT and the federal government’s Medicare Part D pharmacy program. This program, called an Employer Group Waiver Program (EGWP), provides the same coverage you have enjoyed as a retiree, while creating a cost savings for the University.

This plan provides the exact same coverage including the same formulary, copay structure and out-of-pocket maximum. (See Pharmacy Deductibles for more information)

If you have a Medicare Part D program elsewhere and wish to discontinue or not enroll in UVM’s BCBS MedicareRx Plan as your retiree prescription drug plan, you must inform UVM in writing that you do not want to join our plan. Otherwise, enrollment in the UVM plan will automatically cancel your enrollment in a different Medicare Prescription Drug (Part D) Plan or a Medicare Advantage plan.

Drug Coverage for Non-Medicare Retiree remains with Express Scripts

Retirees under age 65 (and their dependent spouses, too, if under age 65) covered under the BCBS VHP health plan have no changes to their prescription drug coverage.

Express Scripts continues to manage the prescription drug plan for retirees and their family members under age 65.

Pharmacy Deductibles

After a $100 deductible, prescriptions are $5 for generics, $20 for preferred brands or $40 for non-preferred brands.

VHP prescription drug coverage provides a maximum out-of-pocket expense of $1,250 per individual and $2,500 per family. Retirees with J Carve-Out or MediComp III coverage have a $750 maximum out-of-pocket.

Pharmacy Guidance

Virtually all US pharmacies participate in the BCBS Express Scripts and MedicareRx network. Please confirm this coverage with your pharmacist to avoid lack of coverage.

Since the Express Scripts network covers the entire United States, there is typically no need to stock up on your prescriptions when you travel out of town.

Home Delivery Service Option

A voluntary mail order prescription drug plan is available for maintenance drugs through Express Scripts (www.express-scripts.com or call 888-222-7886).

You may purchase a 90-day supply at a cost equal to two copays (i.e., $10/40/80), and you will pay no deductible on mail-order prescriptions.

See the complete BCBS preferred prescription drug list online at:

www.bcbsvt.com/member/Rx/index.html

Insurance Cards and Plan Booklets

For retirees new to Medicare, a reminder that your new BCBS JCarveout and MedicareRx prescription drug card(s) and booklets will replace your former VHP materials.

Step Therapy Information

Step Therapy encourages medical plan participants to try lower cost generic medication before the newer, more expensive alternatives.

A complete list of drugs within each of five categories is available. Please visit the BCBSVT online prescription center for complete information:

www.bcbsvt.com/member

Adjusting Your Coverage

- To change dental coverage from high-option to base or base to high-option, complete a Delta Dental Enrollment form.

- All forms are on the HRS website at www.uvm.edu/hrs. Click on “forms” and then on “benefits.”

Changes must be received by December 4, 2015. Email scanned change forms to: HRSInfo@uvm.edu. Mail paper form changes to:

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