



RETIREMENT MATTERS

2023 OPEN ENROLLMENT

If you wish to enroll or make changes to your coverage for 2023: Please download the Healthcare Enrollment Form from the Retirement website (<https://www.cincinnati-oh.gov/retirement/pension-benefits/retiree-healthcare/>), print it out, fill it out in full, sign it and mail to Cincinnati Retirement System (CRS), 801 Plum Street, Suite 328, Cincinnati, Ohio 45202.

Be sure to select the form (Select, Model, or Secure) that matches your Healthcare Plan which is indicated on the cover letter in this mailing. You may also request forms by phone. **Your completed form must be received by CRS no later than November 15, 2022.**

If you want to enroll an eligible spouse or dependents into Medical, HRA, Dental and/or Vision coverage for 2023, you (the Pensioner) must also be enrolled in that same type of coverage. A spouse or dependent can only be added to coverage or removed from coverage during open enrollment, unless there is a qualifying event. Remember that if you are adding your spouse this will require verification of your ongoing marriage. Before coverage changes can go into effect, you will be required to provide the following documentation:

- Photocopy of 2021 Federal Form 1040 showing a married filing status

OR two of the following documents dated within the last 90 days (must indicate both names at the same mailing address):

- Utility Bills
- Bank Statement
- Rental Agreement
- Mortgage Statement
- most current Auto Insurance Statement

IMPORTANT ENROLLMENT DATES

- 11/15/22 Deadline to submit Open Enrollment Forms to CRS
- 01/01/23 Coverage effective date
- 02/01/23 Healthcare Deductions for 2022 start

COMPLETE AN ENROLLMENT FORM ONLY IF YOU WISH TO MAKE CHANGES.

IF CRS DOES NOT RECEIVE A SIGNED HEALTHCARE ENROLLMENT FORM BEFORE NOVEMBER 15, 2022, YOUR CURRENT HEALTHCARE COVERAGE ELECTIONS WILL REMAIN THE SAME AS THEY WERE IN 2022.

NEW SUPERIOR DENTAL CARE CARDS WILL BE MAILED OUT FOR THE 2023 PLAN YEAR.

Please continue to use your current Superior Dental card until you receive your new card(s).

NEW ANTHEM CARDS (FOR PRE-65 PENSIONERS ONLY) WILL BE MAILED OUT IN DECEMBER 2022 FOR THE 2023 PLAN YEAR.

READ ALL LETTERS FROM CVS

A good deal of information regarding your prescription drug coverage comes directly from CVS. For this reason, it is important that you read CVS correspondence carefully. Although CRS manages retiree health care, our office should be contacted with questions only after you have called your providers. This strategy will save you time and resolve problems more efficiently.

During the Open Enrollment period, CRS Members 65-and-over have the opportunity to shop for an outside Medicare Part D Prescription plan and Medicare Advantage plans. If you choose to move to a non-CRS plan, you will lose your current CRS Part D and Medicare Advantage plan with CVS SilverScript and Anthem. If you do not require any changes to your current medical, prescription, dental, or vision coverage, you do not need to do anything during Open Enrollment.

BECOMING MEDICARE ELIGIBLE

- Prior to turning 65, Members should contact Social Security at 1-800-772-1213 to enroll in Medicare Part A and B. If you choose not to enroll or if you do not pay your Medicare premiums on time, Medicare may impose fees, your out-of-pocket costs may increase, or you may lose your medical and prescription coverage.
- When you become enrolled in Medicare, you will need to send a photocopy of your Medicare Health Insurance Card to the Cincinnati Retirement System. Once CRS receives the copy of your Medicare card, official enrollment into the Medicare Part D Prescription Drug Plan (CVS/SilverScript) and the Medicare Advantage Plan (Anthem) can take 8-10 weeks. You should continue to use your CVS/Caremark Prescription Drug card and recent Anthem card until you receive your new Medicare Part D (CVS/ SilverScript) card and Anthem Preferred PPO Medicare Advantage card.
- If, at any time, you choose to purchase a non-CRS Part D plan, you will automatically lose access to CRS Part D (CVS/SilverScript) and Anthem Medicare Advantage Plan.

PRESCRIPTION DRUGS CONSTANTLY CHANGING

As cutting-edge medicines are brought to market, other medicines occasionally leave the market. This is the nature of prescription drugs. Each year new drugs are developed, existing drugs are improved, and older formulas are phased out. These changes may arise from growing knowledge among the medical community or ongoing scientific innovation. It's important to note that many of these changes occur outside the control of CRS. CVS will communicate directly with you regarding any changes to your drug availability.

DIVORCE & HEALTHCARE COVERAGE

Did you know that upon divorce, spouses are no longer eligible for CRS healthcare coverage? Retirees are responsible for notifying CRS in the event of divorce. If CRS is not notified of a divorce in a timely manner, the retiree in question may be required to reimburse CRS for their former spouse's ineligible claims, and may be subject to penalties, and potential loss of their own healthcare coverage.

HEALTH REIMBURSEMENT ARRANGEMENT (HRA)

CRS offers a voluntary and free program called the Health Reimbursement Arrangement to pensioners who (1) choose to waive their CRS healthcare coverage and (2) enroll in another group healthcare plan that is not sponsored by the City. The HRA reimburses up to \$5,000 for single out-of-pocket, or \$10,000 for family out-of-pocket medical expenses incurred under the alternate plan. Members who are eligible for Medicare or Tricare, or will become eligible during 2022, cannot enroll in the HRA. Call the CRS office to request an enrollment packet with more information. The HRA program is free!

AVOID BECOMING A VICTIM OF PREDATORY SALES TACTICS

- Be wary of individuals who claim they work for Medicare. Medicare representatives do not make house calls or solicit beneficiaries by telephone.
- Be cautious of individuals selling Medicare products door-to-door. If someone comes to your home without a scheduled appointment, do not let the individual in your home or provide him or her with personal information.
- Do not be persuaded by an insurance agent who tries to scare you into believing your Medicare rates are going to increase if you do not switch plans immediately.

ANTHEM MEDICARE ADVANTAGE PLAN

A Medicare Advantage (MA) plan combines coverage for Medicare Part A and Part B. It includes additional benefits like health and wellness programs and uses in- and out-of-network doctors. The Cincinnati Retirement System (CRS) MA plan provides preventive care services at no cost to you and includes out-of-pocket limits to protect you from unexpected medical costs.

NOTE: If you enroll in a different Medicare Advantage plan, Medicare will automatically disenroll you from the CRS sponsored plan. If you decide to opt out of the CRS Medicare Advantage Plan, you will not be able to re-enroll into the plan until the next Open Enrollment period or have a qualified life event.

COLA POVERTY EXCEPTION

The COLA poverty exception is available for CRS members covered by the Collaborative Settlement Agreement — who also meet certain financial requirements. Eligible members include those pensioners with at least 5 years of Service Credit, whose verified household income is at or below 150% of the Federal Poverty Level for the current year.

2022 U.S. FEDERAL POVERTY GUIDELINES INCOME LIMIT	
HOUSEHOLD SIZE	150% (POVERTY LEVEL)
1 PERSON	\$20,385
2 PERSONS	\$27,465

If you think you may qualify for the COLA poverty exception, you must submit a copy of your most recent (2021) Federal Income Tax Return (Form 1040) along with all required attachments (1099s, W-2's, etc) to CRS prior to the deadline. If you do not file a Federal Income Tax Return, you will need to submit a letter from the Internal Revenue Service that verifies your non-filing status to CRS prior to the deadline. You will need to submit income verification every year to re-qualify for the COLA Poverty Exception.

TAX RETURN DOCUMENTS FROM	SUBMIT TO CRS IN	COLA EXCEPTION APPLIES TO	US FEDERAL POVERTY GUIDELINE FROM
2021	2022	2023	2022

THE DEADLINE TO SUBMIT REQUIRED COLA POVERTY DOCUMENTS IS 4:00PM MONDAY, NOVEMBER 15, 2022

COVERED STUDENT VERIFICATION

Healthcare coverage for eligible dependent children is available through the end of the month in which they turn age 19, or through the end of the month in which they turn age 24 (must be unmarried and full-time student at an accredited school). Pensioners who request to purchase healthcare coverage for eligible dependent children aged 19-24 are required to provide verification of full-time student status: in December for the Spring Term, and again in August for the Fall Term. Failure to provide verification of full-time student status by these deadlines will result in termination of the dependent's coverage.

CRS HEALTHCARE RESOURCES

MEDICARE ELIGIBLE MEMBERS:

CVS SilverScript	
Prescription Drugs	888-234-0927
Silver Sneakers	866-584-7389
Anthem Medicare	
Advantage	833-848-8730

NON-MEDICARE MEMBERS:

CVS Caremark	
Prescription Drugs	888-202-1654
Anthem Medical	855-315-8928

ALL MEMBERS:

Kroger Diabetes & Hypertension Coaching	888-242-5841
EyeMed Optical	866-299-1358
Superior Dental	800-762-3159

2023 MONTHLY PREMIUMS FOR DENTAL & VISION

PENSIONER ONLY

DENTAL.....	\$27.89
VISION.....	\$2.40

PENSIONER + SPOUSE

DENTAL.....	\$55.56
VISION.....	\$4.57

PENSIONER + CHILDREN

DENTAL.....	\$54.14
VISION.....	\$4.80

PENSIONER + SPOUSE + CHILDREN

DENTAL.....	\$82.07
VISION.....	\$7.06

**NEED
HELP?**

WRITE TO CRS

Cincinnati Retirement System
801 Plum St, Suite 328
Cincinnati, OH 45202

CALL

513-352-3227

FAX

513-352-1520

EMAIL

Retirement@cincinnati-oh.gov
CRSHealthcare@cincinnati-oh.gov

WEBSITE

www.cincinnati-oh.gov/retirement