



CITY OF NEWTON HEALTH AND DENTAL RETIREE OPEN ENROLLMENT GUIDE

The City of Newton provides a comprehensive selection of benefits that help protect your health and well-being. This year, we are excited to announce that we will be partnering with Blue Cross Blue Shield of Massachusetts (BCBSMA) as our new insurance carrier.

This guide will highlight changes and provide an overview of benefits available to you as a City of Newton retiree. Read on to learn more!

WELCOME TO OPEN ENROLLMENT 2023!

The annual Open Enrollment period for health and dental insurance for all City of Newton retirees and eligible dependents will be held

May 3, 2023 – May 31, 2023

IMPORTANT

This year, it is essential that you understand the upcoming health insurance plan changes for Medicare and Non-Medicare retirees. If you are currently enrolled in any of the City's health plans, your current plan will automatically change to an equivalent BCBSMA plan as noted in the chart below.

**If you DO NOT wish to make any other changes to your health insurance plan,
NO ACTION IS REQUIRED**

| Current Plan Options (July 1, 2022- June 30, 2023) | New Plan Options (effective July 1, 2023) |
|---|---|
| Harvard Pilgrim Health Care HMO | Blue Cross Blue Shield of Massachusetts Network Blue New England |
| Tufts Health Plan EPO | Blue Cross Blue Shield of Massachusetts Network Blue New England |
| Tufts Health Plan PPO, POS, OOA, OSA | Blue Cross Blue Shield of Massachusetts Blue Care Elect PPO |
| Tufts Medicare Complement | Blue Cross Blue Shield of Massachusetts Medex 2 with PDP |

Please Note: The changes above will be reflected in all City of Newton Legacy Plans

To enroll in, change or terminate your benefits, you must complete the appropriate enrollment form for that plan. Please note that if you are enrolling in family health or dental coverage, you will be required to provide copies of your marriage certificate for your spouse and or a birth certificates or proof of adoption/custody for dependent children.

What else is changing?

- Blue Cross Blue Shield (BCBSMA) Plans will replace all Harvard Pilgrim HMO, Tufts Health Plan EPO and PPO Plans effective July 1, 2023 for Non-Medicare retirees, spouses, and eligible dependents.
- Tufts Medicare Preferred HMO and BCBSMA Medicare HMO Blue Health Plans will remain in effect through December 31, 2023. A separate enrollment announcement will come in the fall.
- Reintroducing CVS Caremark as the pharmacy benefit manager for BCBSMA.
- Tufts Medicare Complement Plan members will be transitioned to the BCBSMA Medex 2 with PDP plan effective July 1, 2023.
- Our participation in the CanaRx and The Good Health Gateway Diabetes Care Rewards Program will be ending June 30, 2023. We are working with BCBSMA to develop new health and wellness programs for our retirees.

BENEFITS FAIR AND INFORMATION SESSIONS

The City of Newton will hold its in-person **Employee and Retiree Health and Wellness Benefits Fair** on **Wednesday, May 17, 2023, from 10:30 a.m. to 6:00 p.m. in the City Hall War Memorial.** We hope to see you there!

In addition to the Benefits Fair, you and your family members are encouraged to attend an information session hosted by BCBSMA Account Representatives. The dates, times, and locations are highlighted below.

For all members of the Newton Retirement System, forms and benefit summaries can be found on the City of Newton Benefits website at: newtonma.gov/openenroll.

For all members of the MTRS, forms and benefit summaries can be found on the Newton Public Schools website at: newtonma.gov/schoolopenenroll

IN-PERSON OPEN ENROLLMENT INFORMATION SESSIONS FOR RETIREES

Friday, May 12th

Drucker Auditorium/Newton Free Library
9:30 am - 11:30 am

Tuesday, May 16th

Drucker Auditorium/Newton Free Library
9:30 am - 11:30 am

Wednesday, May 17th City Hall

10:30 am - 6:00 pm

Thursday, May 18th

American Legion Post 440
10:30 am - 12:00 pm

Thursday, May 25th

Drucker Auditorium/Newton Free Library
9:30 am - 11:30 am

Health Plans

Under age 65 or not Medicare eligible:

If you and/or your spouse are under the age of 65 or are not eligible for Medicare, this is an opportunity for you to review the plans offered and determine which one best fits your needs. Effective July 1, 2023, the City of Newton will offer two plans through BCBSMA. These plans are BCBSMA Network Blue New England HMO, and BCBSMA Blue Care Elect PPO. Members will automatically be transferred to an equivalent BCBSMA plan unless you submit paperwork to make a change.

Over age 65 and Medicare eligible:

If you are currently enrolled in a Tufts Medicare Complement plan you will automatically be transferred to a BCBSMA Medex 2 plan effective July 1, 2023.

Tufts Medicare Preferred HMO and BCBSMA Medicare HMO Blue Health Plans will remain in effect through December 31, 2023. A separate enrollment announcement will come in the fall.

Medical ID Cards

All retirees and/or their dependents will receive a new Blue Cross Blue Shield medical ID card prior to July 1, 2023.

Medicare Eligibility

If you are 65 or over, and Medicare eligible, you are required by the Social Security Administration (SSA) to enroll in Medicare A and B. If you are not eligible for Medicare, valid proof from the SSA is required to remain enrolled in the City's Non-Medicare health plan. Please contact SSA three months prior to your 65th birthday to enroll in Medicare. Upon receipt of your Medicare Card please contact the Human Resources Department to discuss your options.

Guardian Retiree Dental Plan Benefits

The City offers a retiree dental plan which includes vision discounts through Vision Service Plan (VSP). There will be no increase in dental insurance rates for this fiscal year. Should you wish to enroll in, change, or terminate this benefit please complete an enrollment form. Forms and plan information are available on the City of Newton and Newton Public Schools websites.

Questions? All members of the Newton Retirement System can contact City of Newton Human Resources at 617-796-1262. All members of the Massachusetts Teachers Retirement System (MTRS) can contact Newton Public Schools Human Resources at 617-559-6005.

City of Newton Benefit Comparison Chart for Medicare Eligible Retirees*

| Rates per Member per Month – 7/1/2023 – 12/31/2023 | | | |
|--|--|---|---|
| The contribution percentage for retirees and spouses will be based on the contribution percentage last paid as an active employee. Rates may change January 1, 2024. | | | |
| Coverage | Medex 2 with PDP | Tufts Medicare Preferred | BC/BS Medicare HMO Blue |
| Massachusetts Residency | Not Required | Required | Required |
| 20% Contribution/Month | \$74.30 | \$77.20 | \$79.70 |
| 25% Contribution/Month | \$92.88 | \$96.50 | \$99.62 |
| 30% Contribution/Month | \$111.46 | \$115.80 | \$119.54 |
| Inpatient Services | | | |
| Hospital | 100% Coverage | 100% Coverage after \$300 Deductible per Calendar Year | Day 1-5: \$150 per day copay Day 6 and beyond \$0 copay |
| Skilled Nursing | Covered in Full for 100 Days in a benefit period | Covered in Full for 100 Days in a benefit period | Days 1-20: \$20 copay per day, Days 21-44: \$100 copay per day, Days 45-100: \$0 copay per day |
| Mental Health and Substance Abuse Care days | Covered in Full for 190 days Inpatient Lifetime Limit. After Medicare limit is reached, 120 days per benefit year. | Covered in Full in a Network Psychiatric Hospital. 190 Day Lifetime Limit. 90 covered for inpatient stay. After limit, 60 lifetime reserve days allowed | \$35 per office visit. Inpatient \$150 per day for days 1 - 5 190 day lifetime limit |
| Outpatient Services | | | |
| PCP Office Visits | Covered in full | \$10 copay, \$0 for annual physical | \$15 copay, \$0 for annual physical |
| Specialist Office Visits | Covered in full | \$15 copay | \$35 copay |
| Emergency Room | Covered in full | \$50 copay | \$75 copay |
| Outpatient Services/Surgery | Covered in full | \$50 per day | \$150 per visit |
| Outpatient Rehab Services | Covered in full | \$15 copay | \$15 copay |
| Prescriptions Co-Pay 30 Day | Tier 1: \$10 / Tier 2: \$20 / Tier 3: \$35 | Tier 1: \$10 / Tier 2: \$25 / Tier 3: \$50 | Tier 1: \$10 / Tier 2: \$25 / Tier 3: \$45 |
| Prescriptions Co-Pay 90 Day | Mail Order Tier 1: \$20 / Tier 2: \$40 / Tier 3: \$70 | Mail Order Tier 1: \$20 / Tier 2: \$50 / Tier 3: \$100 | Mail Order Tier 1: \$20 / Tier 2: \$50 / Tier 3: \$90 |
| Prescriptions Co-Pay Maximum | After copays of \$1,500 per plan year, copays reduce to \$0 | After copays of \$7,400 copays are reduced to \$4.15 for generic or \$10.35 for brand name drugs | After copays of \$7,050, copays are reduced to the greater of 5% or \$3.95 for generic or \$9.85 for brand name drugs |
| Dental | Not Covered | Not Covered | \$0 (Preventive services only every 6 months) |
| Hearing Aids | Not Covered | Up to \$500 Allowed for Purchase or Repair every 3 years | \$699 copay per aid for Advanced Aids, \$999 copay for Premium. Must use TruHearing. |
| Routine Eye Exam | Not Covered | \$15 copay | \$0 copay must use an EyeMed Provider |
| Eyewear | Not Covered | \$150 Toward eyeglasses or contacts each year in network, or \$90 out-of-network | Routine exams no copay with EyeMed providers. Covered eyewear \$200 every 24 months |
| Ambulance | 100% for Medicare approved ambulance service | \$50 per day | \$75 copay |
| Chiropractor | Covered in full | \$15 copay | \$15 copay |
| Fitness Benefit | \$150 Fitness /\$150 Weight Management Reimbursement | \$150 Fitness /\$150 Weight Management Reimbursement | \$150 Fitness /\$150 Weight Management Reimbursement |
| Customer Service | 1-800-258-2226 | 1-800-701-9000 | 1-800-200-4255 |

*Note: This is a summary only. Please refer to the carrier's plan description for more detail.

City of Newton
Medicare Eligible and Non Medicare Eligible Retirees
Health and Dental Plans Monthly Rates

Medicare Eligible Health Plans Open Enrollment will be held in November 2023 for a 1/1/2024 effective date.

| Medicare Eligible Retiree Plans* | | | |
|---|----------|----------|-----------|
| July 1, 2023 - December 31, 2023 | | | |
| <i>Retiree Contribution*</i> | 20% | 25% | 30% |
| BCBS Medex 2 with PDP <i>(Replaces Tufts Medicare Complement)</i> | \$ 74.30 | \$ 92.88 | \$ 111.46 |
| Tufts Medicare Preferred | \$ 77.20 | \$ 96.50 | \$ 115.80 |
| Medicare HMO Blue | \$ 79.70 | \$ 99.62 | \$ 119.54 |

| Guardian Dental Monthly Rate | |
|-------------------------------------|-----------|
| July 1, 2023 - June 30, 2024 | |
| Individual | Family |
| \$ 53.51 | \$ 135.95 |

Non Medicare Eligible Retiree Plans

July 1, 2023 - June 30, 2024

If you are 65 or over, you are required to enroll in Medicare Part A & B. If you are not eligible valid proof is required to remain on the City's health plans.

| <i>Retiree Contribution*</i> | Legacy Plan | | City and Newton Public Schools Retired Union and Non Union | | | | | | | |
|---|----------------------------|---------------|---|---------------|-------------------|---------------|-------------------|---------------|--|--|
| | Enrolled prior to 4/1/2012 | | Enrolled and Retired prior to July 1, 2023. | | | | | | | |
| | 20% | | 20% | | 25% | | 30% | | | |
| | <u>Individual</u> | <u>Family</u> | <u>Individual</u> | <u>Family</u> | <u>Individual</u> | <u>Family</u> | <u>Individual</u> | <u>Family</u> | | |
| Network Blue NE (HMO) <i>(Replaces Tufts EPO and HPHC HMO)</i> | \$ 220.18 | \$ 612.57 | \$ 189.51 | \$ 530.25 | \$ 236.89 | \$ 662.81 | \$ 284.27 | \$ 795.38 | | |
| Blue Care Elect (PPO) <i>(Replaces Tufts OSA, OOA, POS and PPO)</i> | \$ 333.44 | \$ 816.60 | \$ 315.62 | \$ 758.02 | \$ 394.53 | \$ 947.52 | \$ 473.44 | \$ 1,137.02 | | |

| <i>Retiree Contribution*</i> | Newton Public Schools** | | City Union and Non Union Contribution based on City's HMO Contribution*** | | | | | | | |
|---|--------------------------------|---------------|--|---------------|-------------------|---------------|-------------------|---------------|--|--|
| | 35% | | 20% | | 25% | | 30% | | | |
| | <u>Individual</u> | <u>Family</u> | <u>Individual</u> | <u>Family</u> | <u>Individual</u> | <u>Family</u> | <u>Individual</u> | <u>Family</u> | | |
| Blue Care Elect (PPO) <i>(Replaces Tufts OSA, OOA, POS and PPO)</i> | \$ 552.34 | \$ 1,326.53 | \$ 820.07 | \$ 1,669.08 | \$ 867.45 | \$ 1,801.64 | \$ 914.83 | \$ 1,934.21 | | |

*Contribution is based on the contribution paid prior to retirement

**Contribution is based on the enrollment date or transfers as of 6/30/2023

***PPO Contribution is based on the City's HMO Contribution at time of retirement