October 12, 2022, Member Alert – OE for Humana



Attention State Health Plan Members: Open Enrollment Has Started!

The State Health Plan's Open Enrollment period is under way and runs through Oct. 28, 2022. Medicare-eligible members will continue to have three plan options in 2023:

- The Humana® Group Medicare Advantage (PPO) Base Plan (90/10)*
- The Humana® Group Medicare Advantage (PPO) Enhanced Plan (90/10)*
 - The Base PPO Plan (70/30)

All members currently enrolled in the Humana Medicare Advantage (Base or Enhanced) Plan (90/10)* will REMAIN on that plan for 2023. If you want to change plans or need to make changes regarding your dependents, you will need to take action during Open Enrollment, which ends Oct. 28. If you don't want to make a change to your plan, no action is required. If you are covering non-Medicare dependents on the Enhanced PPO Plan (80/20) you will be required to take action during Open Enrollment to re-elect that dependent coverage as they will be moved to the Base PPO Plan (70/30) for the 2023 benefit year.

All Medicare members currently enrolled in the Base PPO Plan (70/30) administered by Blue Cross NC will be automatically enrolled into the Humana® Group Medicare Advantage (PPO) Base Plan (90/10)* effective January 1, 2023. If you want to change plans or need to make changes regarding your dependents, you will need to take action during Open Enrollment.

Remember, the choices you make during 2023 Open Enrollment are for benefits effective January 1, 2023, through December 31, 2023.

This year, eligible members will continue to have **PREMIUM-FREE COVERAGE** for the Humana Base Plan, and it will only cost \$4 to add eligible dependents! In addition:

- The Humana Group Medicare Advantage Plans (90/10) are different than what you can enroll in as the general public and what you see advertised on television. What the State Health Plan offers members is often **BETTER** and, in most cases, **MORE COMPREHENSIVE** coverage.
- The Humana Group Medicare Advantage Plans have a benefit value <u>equivalent to a 90/10 plan, which could mean</u> <u>significant savings for you!</u>
- The Humana Group Medicare Advantage Plans (90/10) have established copays for the majority of services, which helps you predict up-front cost. The Base PPO Plan (70/30) pays for services after Medicare, which makes it difficult to predict your out-of-pocket costs.
- You have the ability to see providers outside the network for the same copay or coinsurance as in-network providers, as long as the provider participates in Medicare and accepts the plan under which you are covered.

 Medicare Advantage plan members have already seen significant cost savings from our Humana contract, projected to save \$600 million over its three-year span.

This month, the State Health Plan is hosting several webinars, inperson information sessions and a Telephone Town Hall for Medicare members. These outreach events provide an overview of your health plan options. If you would like to attend an event, please RSVP online at <u>www.shpnc.org</u> or call 866-720-0114, Monday - Friday, between 8 a.m. - 5 p.m. ET.

* The Humana Group Medicare Advantage Plans have a benefit value equivalent to a 90/10 plan.

2023 Open Enrollment Resources

2023 Medicare Member Decision Guide →

<u>Take Action Now to Complete Open Enrollment \rightarrow </u>

The Eligibility and Enrollment Support Center (855-859-0966) offers extended hours during Open Enrollment if you need assistance.

Monday-Friday 8 a.m.-10 p.m.

Saturdays 8 a.m.-5 p.m.



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