



University System of Georgia Aon Retiree Health Exchange FAQs for Retirees

June 3, 2015

Why is the University System of Georgia (USG) changing retiree health care coverage?

To continue to provide a valuable health care benefit for current as well as future retirees, we must change the way in which we offer health care benefits. More opportunities are now available for retirees to buy individual insurance plans at a reasonable price, which means increased competition among insurance companies offering coverage to supplement Medicare benefits. The majority of USG Medicare-eligible retirees can buy insurance that offers equal or better health care and prescription drug coverage than the current USG-sponsored options—and may even pay less than they do today. And with the help of a Medicare coordinator like the Aon Retiree Health Exchange, USG retirees can explore a variety of options at prices that fit their individual needs and budgets. Different plans can be selected for the retiree and his or her Medicare-eligible dependents so that everyone's needs are better met.

What are the benefits of moving from group to individual health care insurance?

USG realizes that this will be a significant change from the way you're accustomed to choosing and paying for your health care coverage. However, you and your Medicare-eligible dependents can expect to benefit from this change.

- **Greater choice.** Because of the large number of health care insurers available through the Aon Retiree Health Exchange, you'll be able to choose the specific coverage level and premium that will best suit your needs.
- **The ability to pay less for equal or better coverage.** Due to increased competition among insurers, you may find an even better value among your new coverage options, depending on your health care needs.
- **Reimbursement for coverage.** Each year, USG will fund a Health Reimbursement Account (HRA) to help reimburse you for health care premiums, as well as your eligible out-of-pocket costs.
- **Flexibility.** Unlike group coverage, individual coverage options allow you to select a different plan for yourself and your Medicare-eligible dependents to accommodate each person's individual health care and financial needs.

How will I get health care coverage in 2016?

Instead of obtaining health care coverage through the USG group health care plan, you will obtain individual health care insurance through the Aon Retiree Health Exchange—the industry's leading private exchange.

The Aon Retiree Health Exchange is staffed with unbiased, licensed, certified, and dedicated Benefits Advisors who will work one-on-one with you, **at no cost to you**. These dedicated Benefits Advisors will help you explore all your health care plan options, enroll in the one that best meets your needs, and then provide ongoing support after enrollment. You are welcome to include family members or others in your discussions with your dedicated Benefits Advisor.

Is there a deadline for choosing 2016 coverage?

Yes. USG group health care coverage will end on December 31, 2015, so if you plan to obtain new insurance through the Aon Retiree Health Exchange, you must do so no later than December 31, 2015, to have coverage in January 2016.

If you do not plan to enroll in coverage through the Aon Retiree Health Exchange and wish to acquire it through a different means (e.g., your spouse's plan), **you'll need to work directly with that plan provider to ensure that you meet all dates and other requirements to successfully complete enrollment in the other coverage.**

Is USG going to contribute toward the cost of my retiree health care?

Yes. USG will contribute to a Health Reimbursement Account (HRA)—an account that USG will fund to help reimburse you for health care premiums and other eligible health care expenses.

To be eligible for this contribution, you must obtain coverage through the Aon Retiree Health Exchange during the enrollment period for 2016 (October 1–December 31, 2015). Information about the HRA and the contribution USG will make on your behalf will be included in the Enrollment Kit that will be mailed to your home in September.

Important: While you will not be required to use the Aon Retiree Health Exchange to obtain coverage, USG will not provide you with an HRA contribution unless you do so. (Plus, if you do not enroll in a plan through the Aon Retiree Health Exchange for the 2016 plan year, you will not be eligible for the HRA in the future.)

What's the process for paying health care premiums?

You will be responsible for paying premiums directly to your new insurance company. To ensure that you don't miss a payment and risk losing coverage, USG recommends that you take advantage of automatic payment features, like direct debit, through your new insurer. Your dedicated Benefits Advisor can help you prepare to pay for your premiums.

How do I arrange to meet with my dedicated Benefits Advisor through the Aon Retiree Health Exchange?

Your first telephone meeting with your dedicated Benefits Advisor will be scheduled for you in advance. You'll find your meeting date and time in the Enrollment Kit you'll receive by mail in September. You must confirm—or reschedule—your appointment either online or by calling the Aon Retiree Health Exchange. Please note that the Centers for Medicare and Medicaid Services (CMS) will not allow the Aon Retiree Health Exchange to keep this appointment unless it's confirmed in advance.

During your appointment, your dedicated Benefits Advisor will ask questions to get to know your health care needs and coverage preferences. Using this information, your dedicated Benefits Advisor will help you explore plans that best meet your needs and fit your budget, based on the insurance options available in your area. After you choose a plan, your dedicated Benefits Advisor will help you complete an application and other required forms while answering any questions and concerns you may have.

Do Benefits Advisors charge a fee for helping me?

No. There is no cost to you for this service. Aon Retiree Health Exchange Benefits Advisors are completely objective and will receive no special compensation to enroll you in a specific plan.

Do I have to speak with a dedicated Benefits Advisor to get health care coverage?

While you'll be able to go online to complete nearly all the necessary steps to obtain coverage through the Aon Retiree Health Exchange, you'll still need to briefly speak with your dedicated Benefits Advisor by phone to confirm your enrollment election(s).

The Centers for Medicare and Medicaid Services (CMS) govern the activities of the Aon Retiree Health Exchange. CMS requires that each retiree who enrolls through the Aon Retiree Health Exchange (whether online or by phone) listen to and confirm a series of questions related to enrollment and provide a voice signature as the final step.

What happens if my spouse and/or children are not eligible for Medicare?

If you have a spouse and/or children currently covered under the USG group health care plan who are not eligible for Medicare, they'll continue to be covered under the USG plan until they lose eligibility under the USG plan or become eligible for Medicare.

Where can I get answers to additional questions I may have?

You'll find detailed answers to common questions, as well as important contact information, in the Enrollment Kit you'll receive by mail in September. However, you'll also have opportunities to attend retiree meetings in August and September hosted by representatives of USG and the Aon Retiree Health Exchange. These representatives will explain the health care coverage options available and answer general questions. You may also call the Aon Retiree Health Exchange at **1-866-212-5052**.

Here's a list of what you can expect to occur and when:

August–September: Representatives of USG and the Aon Retiree Health Exchange will host retiree meetings throughout the state of Georgia.

September: An Enrollment Kit from the Aon Retiree Health Exchange will be mailed to you. This package—which will have the USG logo shown here on the outside—will contain a *Medicare Insurance Guide* (including a helpful checklist of upcoming steps) and the date and time of your telephone appointment with your dedicated Benefits Advisor.



October 1–December 31, 2015: This is your enrollment period for choosing 2016 individual health care coverage to supplement Medicare Parts A and B.

December 31: Your enrollment in USG group health care coverage will end.

January 1, 2016: Your 2016 benefits will begin, if you enrolled in coverage through the Aon Retiree Health Exchange.

What do I do if I have an issue with my new coverage *after* I've enrolled?

If you enrolled through the Aon Retiree Health Exchange, you can continue to get help in several ways. If you can't get answers to questions about your plan or resolve issues directly with your insurance plan provider, you can call your dedicated Benefits Advisor.

More complex issues can be directed to a team of professional advocates who are also available through the Aon Retiree Health Exchange. Advocates have experience in a variety of Medicare insurance areas, including claims, billing procedures, appeals, and even problems getting appointments with specialists. Your dedicated Benefits Advisor can connect you with an Advocate. This service is available at no cost to you.

I'm retired from USG and over age 65, but am covered as an active employee through another employer. Will I be able to enroll through the Aon Retiree Health Exchange?

No. If you have employee coverage through another employer, Medicare will not be your primary source of health insurance. To enroll in individual coverage through the Aon Retiree Health Exchange, Medicare must be your primary source of health care coverage.

If I will turn 65 in early 2016, when will I be notified by Aon to begin preparing for enrollment?

If your Medicare eligibility effective date is January 1 or February 1, 2016, you will be notified as part of the initial Aon Retiree Health Exchange enrollment in 2015. If your Medicare effective date is March 1, 2016, or later, you will receive notification approximately 90 days prior to your Medicare effective date.

Who chooses the insurance coverage options offered through the Aon Retiree Health Exchange?

Aon applies stringent guidelines to evaluate and select the carriers that participate in the Aon Retiree Health Exchange. Aon examines the insurance carriers' financial ratings, premium stability, member service level and Medicare Star performance. In addition, carriers must meet the technology requirements to enable electronic enrollment and execute premium auto-reimbursements.

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