State Retiree Health Plans

Medicare Monthly Rates[11]					
Plan Name	Plan Type	Medicare I One Eligible[5]	Medicare II One Under/Over[6]	Medicare III Both Eligible[7]	MA-PD Plans[10]
Self-Insured HMO/PPO	Standard	$430.18	$1,243.63	$860.35	
	HDHP	$324.26	$1,061.06	$648.52	
Capital Health Plan[7]	Standard (Retiree Advantage)	$319.44	$1,345.02	$638.88	
	HDHP (Retiree Advantage)	$290.74	$1,202.94	$581.48	
	MA-PD[8] (Classic)				$203.00
Humana	HMO MA-PD[8]				$74.30
	PPO MA-PD[8]				$353.43

- Yellow: **Retiree conversion of your current employee health plan**
  - Includes the **Florida Blue PPO** and the state HMO for your county.
    - HMO provider will be **Aetna**, **UnitedHealthcare**, or **Capital Health** based on where you live.
    - If you live outside Florida, you are eligible for the Florida Blue PPO only.
  - Premium:
    - $430.18 monthly for individual coverage.
    - $1,243.63 monthly for family coverage if at least one member is over 65.
    - $860.35 monthly for family coverage if both spouses are enrolled in Medicare.
    - These premiums would be in addition to Medicare Part B premiums.
  - This plan is part of the **original Medicare** structure: **supplementary** to Medicare Part B for medical coverage (similar to Medigap) and **primary** for prescription drug coverage (no need to enroll in Part D).
  - These plans are the only option for early retiree coverage (under age 65) or for covering family members under age 65 (spouse or dependent children).
  - The Florida Blue PPO is the only retiree plan that offers international coverage.
  - **This is the default plan. If you do not want state retiree coverage or you would like to participate in one of the Humana plans, you must actively choose that.**

- **Humana Group Medicare Advantage Plans**
  - Green: HMO
    - No out-of-network coverage.
    - $74.30 per person monthly in addition to Medicare Part B premiums.
  - Blue: PPO
    - Out-of-network and in-network coverage similar in most medical categories.
    - $353.43 per person monthly in addition to Medicare Part B premiums.
  - **Everyone covered must be enrolled in Medicare** prior to choosing one of these plans.
  - These plans offer medical, hospital, and prescription drug coverage (no need to enroll in Part D) but **may have more limited provider networks** than original Medicare.
  - Dental, vision, hearing, and podiatry benefits.
  - Health coaching, Go365, My Directives Advance Care, Silver Sneakers, and Well Dine programs.

Enrollment Process: FRS Investment Plan Members

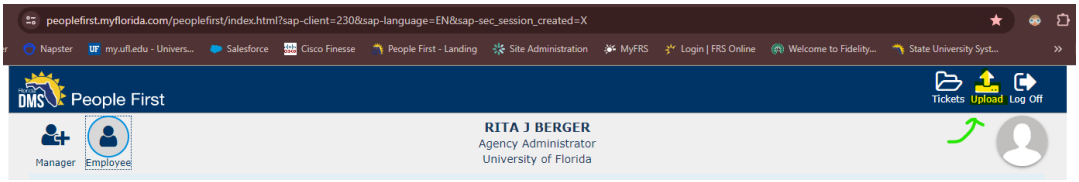
Here are the steps to access your state retirement funds and enroll in one of the state retiree Medicare supplements immediately after the end of your employee coverage.

- Submit your retirement notice to your department and copy UF Benefits at benefits@ufl.edu.
- Contact a myFRS counselor at 1-866-446-9377 to review your Investment Plan account and schedule a distribution.
    - You must take a distribution from your state retirement plan to be eligible for retiree coverage. It can be as small as $1, but that distribution is what marks you as a retiree in the state's eyes.
    - If there will be a gap between the end of your employee coverage and your retirement distribution, you may need to enroll in COBRA or Eligible Former Employee (EFE) coverage to bridge that gap and remain eligible for retiree coverage.
        - Contact the People First Service Center at 866-663-4735 to determine whether you will need to enroll and for assistance in doing so.
        - **If you have reached regular retirement criteria, you have the option to request a 1-month early distribution of up to 10% of your retirement fund**. Doing so would qualify you for retiree coverage immediately rather than waiting the usual 3 months and needing to enroll in COBRA or EFE.
- Complete the FRS Investment Plan Health Insurance Subsidy Packet to offset your monthly health insurance expenses.
    - You must demonstrate participation in a health plan to receive these funds.
    - The People First Service Center should be able to sign off on the health plan participation section of the form for you.
    - The section that requires notarization may be completed at an appointment with a Benefits team member if desired. We are all notaries.
- Contact UFHR Benefits to request your employment and employer health coverage verification form for your Medicare Part B application (CMS-L564).
    - This form will certify that you've had employer group health coverage since you turned 65 so that you won't be charged a fee when you enroll in Medicare.
- Enroll in Medicare starting no later than the last month you'll have your employee coverage.
- Decide whether a Humana Medicare supplement plan or the retiree version of your current plan is best for you.
    - SHINE is an excellent nonprofit offering free Medicare advising. Their representatives are familiar with the state retiree options and can help you navigate this decision. Their phone number is 800-963-5337.
- **If choosing one of the Humana plans:**
    - When your Medicare enrollment is complete, upload your Medicare card to your People First account and request enrollment in your retiree plan of choice.
    - **Complete this enrollment by the 20th of the month BEFORE you want your retiree coverage to start** so that you can roll straight into that retiree plan when your employee coverage ends.

Uploading Medicare Card to People First

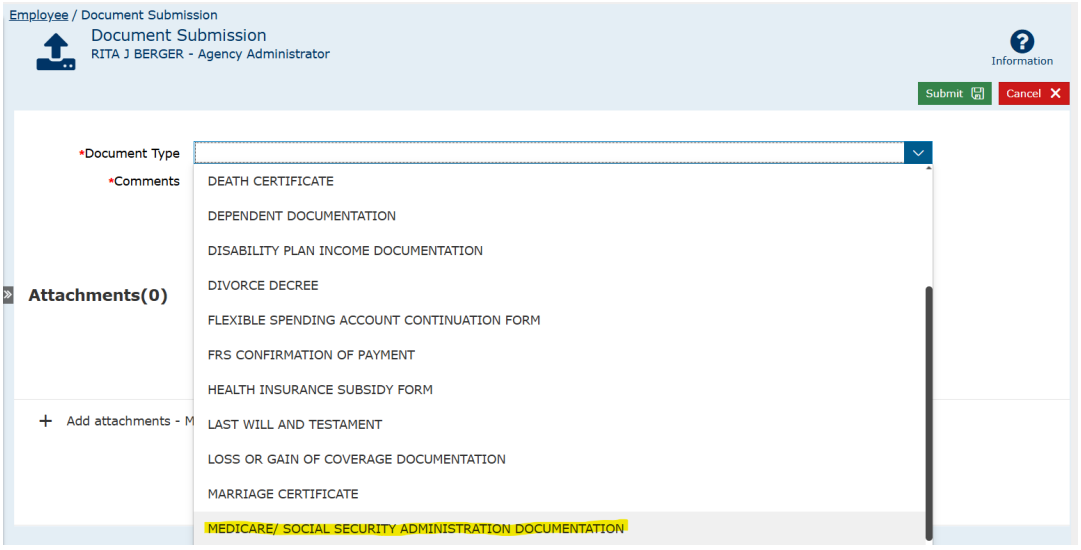
If you are enrolling in one of the Humana Medicare supplement plans, you will need to complete this process by the 20th of the month before you want your coverage to start.

- Log in to your People First account. Your People First ID is available in myUFL at:
    - Menu > My Self Service > Benefits > PFID & Beneficiary Info
- Select "Upload" in the top right corner of the screen:

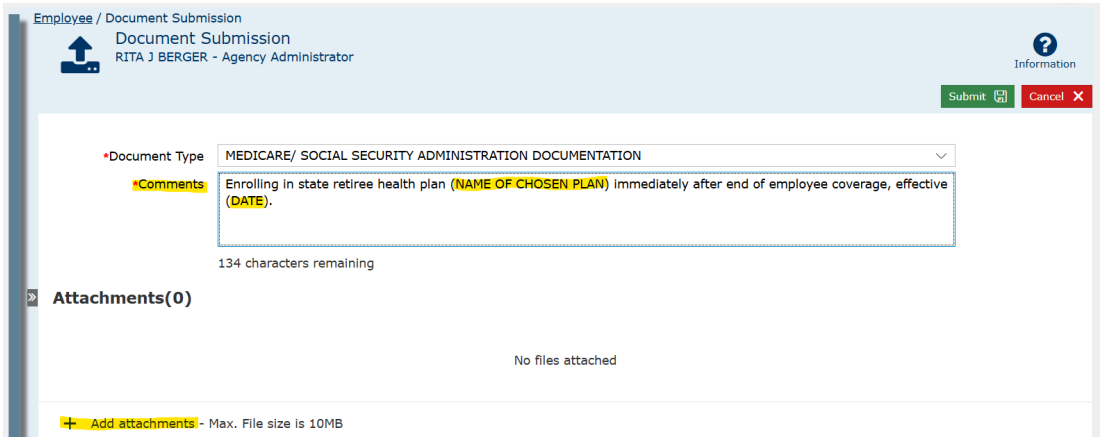


- Click "New"

- In the drop-down menu, select "Medicare/ Social Security Administration Documentation"



- In the “Comments” box, share which retiree health plan you want and the desired start date (Ex: enrolling in myFlorida Group Medicare Advantage PPO immediately after end of employee coverage, effective DATE).
- Through "+ Add attachments," upload a copy of your Medicare Part B card.
    - If you are also enrolling your spouse in the plan, upload their Medicare Part B card as well.
    - If your spouse is under age 65 or if you are covering dependent children, the only plan you may choose is the retiree conversion of your current state health plan. No documentation is required for that enrollment.
- If not previously provided, also attach dependent verification documents.
    - For spouse:
        - Marriage certificate if married less than one year.
        - Most recent joint tax transcript if married longer than one year.
    - For child:
        - Birth certificate or official adoption record.

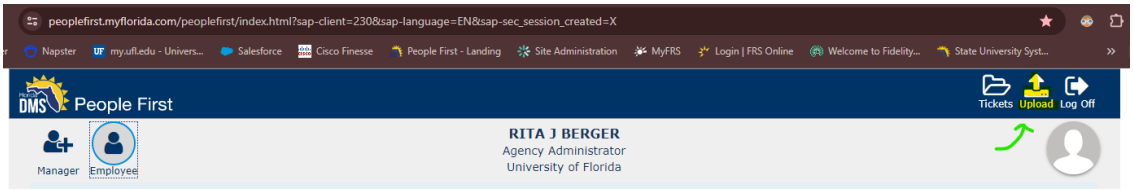


- Click "Submit."

The People First Service Center at 866-663-4735 can confirm receipt of your documentation and the start date for your retiree coverage. Keep your ticket number on hand to help the agent find it.

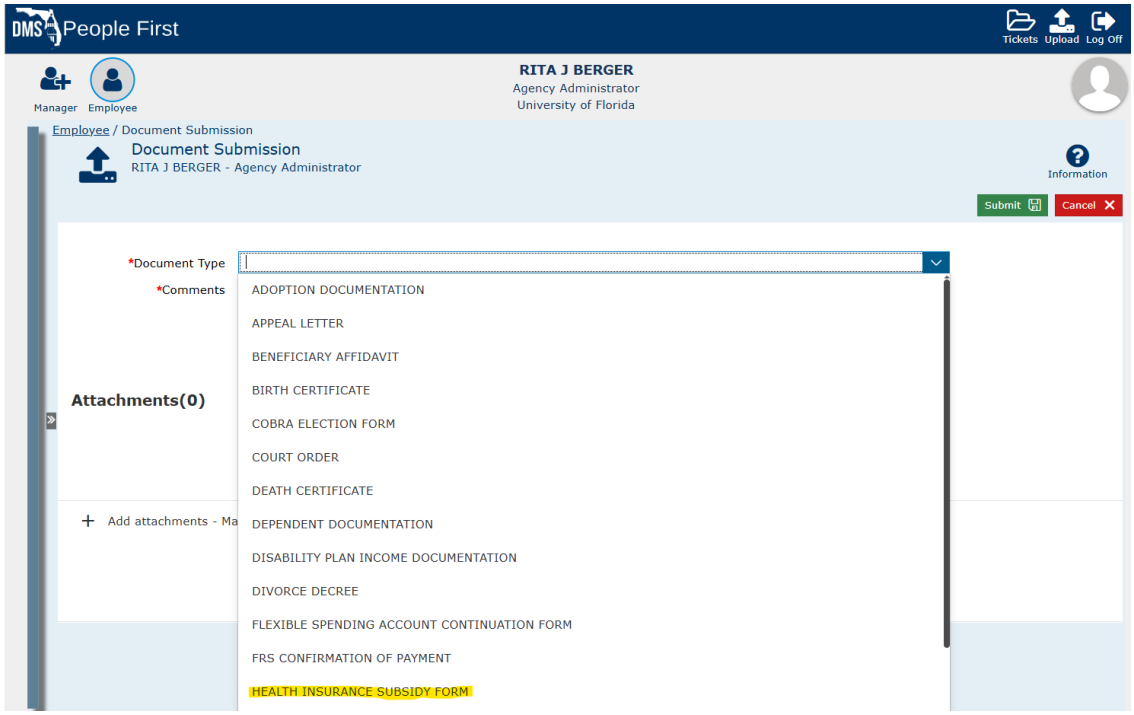
Requesting Certification of your Health Insurance Subsidy (HIS form) from People First:

- Log in to your People First account. Your People First ID is available in myUFL at:
    - Menu > My Self Service > Benefits > PFID & Beneficiary Info
- Select "Upload" in the top right corner of the screen:

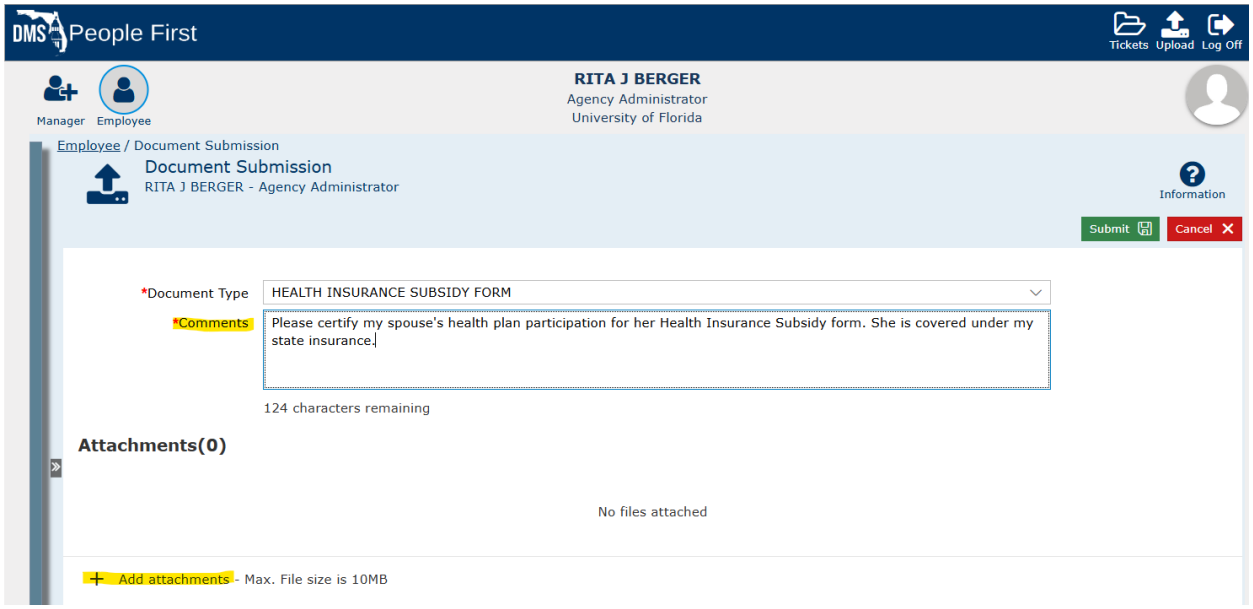


- Click "New"

- In the drop-down menu, select "Health Insurance Subsidy Form"



- In the “Comments” box, request certification of state health plan participation for the HIS applicant, whether yourself or your spouse.
- Add the HIS form with the applicant information completed through “+ Add attachments.”



- Click "Submit."

The People First Service Center at 866-663-4735 can confirm receipt and processing of your form. Keep your ticket number on hand to help the agent find it.

If you have any questions, the UF Benefits Team is here to help! Please feel free to reach out.