



Aetna Retirees Association, Inc
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News

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LIAISON TEAM MEETING WITH CVS HEALTH ON 2023 BENEFITS AND RATES

On September 27, 2022, the ARA Liaison Team met with CVS Health representatives to learn about changes to the administration, benefits and rates for 2023. Several CVS people attended along with a number of Aetna representatives with whom we have been meeting for many years.

ADMINISTRATIVE PROCESS

The annual enrollment kits this year will be mailed during the week of October 11, 2022, earlier than in past years. The annual enrollment opens on October 24, 2022 and will end on November 4, 2022. As in past years, if needed, you will have the opportunity to modify your plan choice(s) beginning mid-November and ending December 31, 2022.

As in past years, this year’s enrollment will be “passive” meaning that, unless you are making plan changes, you will be enrolled in the same plan in 2023 as you were in 2022. Medicare retirees who newly enroll or make plan changes will receive new ID cards. All other Medicare retirees will not receive new ID cards. Pre-Medicare retirees will all receive new ID cards. Those pre-Medicare retirees who are registered on the member portal and provided an email address will receive digital ID cards; all other pre-Medicare retirees will receive physical ID cards.

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2023 ANNUAL ENROLLMENT AND COMMUNICATIONS TIMELINE

<u>Communication Event</u>	<u>Timing</u>
Annual Notice of Change Letter Mailed	September
Annual Enrollment Kits Mailed	October 11
Annual Enrollment Opens	October 24
Enrollment Portal Opens	October 24
Aetna Benefits Center Begins Taking Questions	October 24
Annual enrollment Ends	November 4
Confirmation Statements Mailed	Week of December 19
Annual Notice of Change Letter	December

Retiree Information/Contacts:

Enrollment Portal: www.RetireeHealthAccess.net/CVS

Toll Free Phone: 1-888-972-3862

Aetna will continue to use the Bswift/Aetna retiree product so you should expect to experience a similar experience as compared to 2022.

You may expect to receive an “abbreviated version” of the enrollment materials as in past years. As a reminder, these materials will include:

- What’s new/what’s changing
- A personalized enrollment worksheet (with Life Insurance amount shown)
- Instructions on how to enroll
- Limited plan information

The Resource Guide containing pertinent contact areas and their phone numbers will continue to be on our website.

2023 MEDICARE PLANS AND PRICING

For 2023, there will be a number of plan enhancements to the Medicare Advantage and Part D Rx plans.

- Free transportation benefits: 24 trips with 60 miles allowed per trip (a complete description of this benefit will follow in a later newsletter)
- The addition of Transform Diabetes Care Program (a complete description of this benefit will follow in a later newsletter)
- Expansion of the Medicare Advantage PPO service area in 15 states moving members currently in ESA to the PPO (affected members will be notified)
- For RX plans, new CMS imposed indexed limits will be included: initial coverage limit will be \$4,660 and gap limit of \$7,400 (prior limits were \$4,430 and \$7,050); in addition, catastrophic Rx minimums will be \$4.25 for generics and \$10.35 for all other medications
- Prescription formulary names are being changed to “Comprehensive” for Rx Plus plans and “Basic” for Standard and Rx Value plans
- Vaccine coverage – the Aetna plan covers Medicare covered Part D vaccines at no cost even if your plan has a deductible which you haven’t met
- Insulin coverage – you will not pay more than \$35.00 for a one-month supply (formulary, covered brand or not) of each insulin product covered by the plan (just the meds, not supplies such as syringes, etc.) no matter what cost-sharing tier it is on and even if your plan has a deductible which you haven’t met

The changes in Medicare pricing are as follows:

- PPO/ESA with Rx Plus: a 1.8% increase (Rx Plus standalone a 2.4% increase)
- PPO/ESA with Rx Standard: a 1.0% decrease (Rx standard standalone a 1.6% decrease)
- Value PPO with Value Rx: no change
- Medicare Indemnity: an increase of 5.0%

PRE-MEDICARE PLANS

Plan changes and new programs for the pre-Medicare plans are as follows:

- A new Hybrid Gold plan added to mirror the plan for actives; hybrid gold has a richer copay than the existing Hybrid silver plan, a lower deductible and higher premium
- For Hybrid Gold and Hybrid Silver, Physical Therapy and Chiropractic claims will be copay-based
- For Hybrid Gold and Hybrid Silver, Outpatient Mental Health will have \$0 copay (was \$25)
- For the HSP 1 plan, to comply with IRS regulations, the deductible and OOP limits will increase (deductible from \$1,400 to \$1,500 in network and the OOP from \$2,800 to \$3,000 in network per individual)
- A new Cardiac Atrial Fibrillation program will be added
- The Teledoc Virtual Pharmacy Care program will be replaced by CVS Health Virtual Primary Care

The new Hybrid Gold plan for pre-Medicare retirees combines features of an HMO with features of a high deductible health plan.

Both the Hybrid Gold and hybrid Silver plans only cover in network care, except in emergencies. Hybrid Gold has higher premium rates and lower deductible than Hybrid Silver.

Both Hybrid plans offer first dollar coverage for in network preventive services and copays for high value lower cost services (PCP visits, independent lab and x-ray, generic drugs, chiropractic care, physical therapy, MinuteClinic, CVS Health Virtual Primary Care).

All other claims apply to a deductible: Hybrid Gold, \$2,000 individual/\$4,000 family; Hybrid Silver: \$4,000 individual/\$8,000 family). Once deductible and out-of-pocket is met, you enter the no coinsurance phase.

Some key changes for the 2023 pre-Medicare plans:

- The new CVS Health Virtual Primary Care (VPC) program allows members who do not have a PCP (or that simply want virtual visits) to elect a designated provider for primary care
- Teledoc providers will be out-of-network effective January 1, 2023
- For Health savings Plans, before the deductible is met, the first virtual primary care visit with CVSH VPC is \$144 with primary care visits thereafter at \$99
- Once the deductible is met, member cost share for virtual primary care visits is \$0
- Cost share for telemedicine brick-and-mortar providers will follow the cost share for the type of provider utilized

The changes in pre-Medicare pricing are as follows:

- HSP 1 an increase of 6.93%
- HSP 2 an increase of 8.54%
- HSP 3 an increase of 8.58%
- Hybrid an increase of 3.31%

2023 DENTAL PLANS AND PRICING

There are no plan changes to the Dental plans for 2023.

Retiree Dental price changes are: DMO an increase of 2.9%, PPO an increase of 8.3% (please note – the rates for these plans were decreased in 2022 by 6.9% and 8.7%, respectively)

RETIREE LIFE INSURANCE

There are no changes in the administration of the various types of Life Insurance plans in effect.

INFORMATION CONCERNING LTD PARTICIPANTS

As in the past, information on Long Term Disability will be included in the annual enrollment kit.

CVS HEALTH FOCUS ON HEALTHCARE SERVICES

PayFlex: CVS health has sold PayFlex, a provider of health savings accounts (HSAs) and consumer-directed benefit administration services to Millennium Trust, a leading provider of retirement and financial services for employers, institutions, advisors and individuals. Under the agreement, PayFlex will remain Aetna's preferred provider of HSAs and some other consumer-directed benefit solutions for Aetna's existing and prospective healthcare clients.

Signify Health: CVS Health will merge with Signify Health in the first half of 2023. Signify is a healthcare company with a network of more than 10,000 clinicians who can visit patients within their homes, either in-person or virtually, to identify their needs and connect them to follow up care. This action is in alignment with CVS health's focus on Health Equity since a patient's health is largely affected by where they live, how they eat, and other factors that happen outside any care provided during a brief doctor's office visit.

Once we clarify how this program interfaces with and/or replaces Aetna's current Healthy Home Visits (the current program where a member will receive a call requesting that a clinician visit their home), we will provide you with additional information.

ADDITIONAL INFORMATION

As in the past, the Annual Notice of Change Letter will be mailed (or has been mailed to some members already) as required by the Federal Government. This letter oftentimes causes some confusion; however, as we have indicated in the past, this letter has no effect on your enrollment process. Accordingly, please proceed with your enrollment without regard to this letter.

At the present time, there are a number of proposed/pending bills affecting our benefits on both the national and local levels. We are on top of following these bills and, when they are finalized and we learn the impact on our benefits, we will so notify you.

We strongly encourage you to carefully and thoroughly read any and all material you receive so you will be in a position to make the appropriate benefit choices for you and your family. In this regard, we are seeing a large amount of advertisements from various vendors (including local Aetna plans) offering plan benefits like "zero premium", "zero deductible", "zero copay", "zero coinsurance" along with other incentives. While these plans might appear to be advantageous and a great buy, before enrolling in one of these plans, please carefully and fully examine exactly what these plans provide.

ADDITIONAL INFORMATION *(Continued)*

Many offer very limited networks of providers, limited benefits and other items which would make these plans a poor fit for your needs.

During your enrollment process, please remember to contact the appropriate area within the Aetna Retirement Service Center if necessary. The appropriate phone numbers will be contained in your enrollment kit. As always, if, after attempting to rectify issues on your own, you still need assistance, you may contact us at ARA.

2023 COLA / AETNA and SOCIAL SECURITY ESTIMATES

2023 COLA AETNA and SOCIAL SECURITY					
Source: U.S. Bureau of Labor Statistics CPI-W https://www.ssa.gov/oact/STATS/cpiw.html					
NOTE: This ESTIMATE assumes that September will be the same as August, 2022. Actual September CPI data will be released on October 13, 2022					
					Average for
Year	July	August	September	Sum of July/Aug/Sep	July/Aug/Sep
2021	267.789	268.387	269.086	805.262	268.421
2022	292.219	291.629	291.629	875.477	291.826
	Increase over 2021 =		22.543	70.22	23.405
	September to September =		8.4%		
	2022 Aetna COLA increase =		3%	2022 SS COLA increases =	8.7%
	Note: Aetna capped at + or -3%		Note: No Cap on SS increases		
<p>Note: Both Aetna & Social Security base COLA adjustments upon CPI-W data. However: (1) Aetna bases its 2023 COLA increase (or decrease) upon the standalone month of <u>September</u> 2021 CPI-W compared to September 2022 CPI-W, capped at + or -3% while, (2) Social Security bases its 2023 increase (if any--unlike Aetna, Social Security never decreases) upon the CPI-W <u>average of the 3rd Quarter</u> of 2021 compared to the CPI-W average of the 3rd Quarter of 2022. Because they are comparing different periods, the standalone month vs. 3rd quarter average calculations normally produce somewhat different COLA amounts for Aetna vs. Social Security.</p>					

As you communicate with a retiree, retiree group or a colleague, we encourage you to provide them with information and the benefits of joining ARA. Please refer any prospective members to our website at www.aetnaretirees.com for additional information and an application form. Further, you may encourage prospective members to contact any Board Member for additional information. If, however, a retiree or colleague does not wish to become an active member and would still like to hear what we are doing, please have them state “communications only” on the application. We will send them our communications.

CONTACT ARA!

We welcome your comments, questions, ideas and letters to the editor. See mail and website addresses on page 1.

Sharon Reed, Editor

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