

What's changing with your PEBB health coverage for 2020 (retirees)

All changes are effective January 1, 2020.

Medical plan benefits



BLUE CROSS

As of January 1, 2020, Premera Blue Cross Medicare Supplement **Plan F** will not accept new members.

- If you (the retiree) are enrolled in Plan F as of December 31, 2019, you can stay in Plan F unless an enrolled dependent becomes eligible for Medicare on or after January 1, 2020, or you defer or terminate your PEBB coverage. If you defer or terminate, you cannot reenroll in Plan F in the future.
- If you choose to stay in Plan F, you do not need to call or submit any forms to stay enrolled. Your Plan F coverage will continue automatically.
- **You must make a change to your account** if you are enrolled in Plan F and an enrolled dependent becomes eligible for Medicare on or after January 1, 2020. You must either change your medical plan or remove your dependent from coverage to stay in Plan F. If you remove your dependent for this reason, they will not be eligible for PEBB Continuation Coverage.
- If your dependent is enrolled in Plan F and you become eligible for Medicare on or after January 1, 2020, you will have to change to another PEBB medical plan for you and your dependent.
- Premera Blue Cross Medicare Supplement Plan G will be offered as a new PEBB medical plan.
 - Plan G is the only PEBB Medicare Supplement plan available for members enrolling on or after January 1, 2020.
 - The only benefit difference between Plan F and Plan G is that Plan G does not cover the Medicare Part B deductible. For more benefit information, see Premera's Outline of Medicare Supplement Coverage in the PEBB Retiree Enrollment Guide (available November 1).

If you have questions about Plan G, please call Premera Blue Cross at 1-800-817-3049. If you have questions about making a plan change, please call the PEBB Program at 1-800-200-1004 (TRS: 711).



Kaiser Permanente of the Northwest will:

- Add the following Oregon ZIP Codes to its service area:
 - Clackamas County: 97028
 - Marion County: 97350
 - Linn County: 97321, 97322, 97335, 97348, 97355, 97358, 97360, 97374, 97377, 97389, 97446

Kaiser Permanente of Washington will:

- Open new medical locations in Ballard, West Olympia, and Smokey Point. New facilities have already opened in Gig Harbor and South Lake Union.
- Remove these partially covered counties from its service area to comply with RCW 41.05.820: Grays Harbor, Lincoln, Pend Oreille, and Stevens (in Washington); Umatilla (in Oregon); and Kootenai and Latah (in Idaho). However, members who live in these counties but work in counties served by Kaiser Permanente WA can stay enrolled in the plan and visit local Kaiser Permanente facilities because eligibility is not based only on where you live.
- Remove San Juan County from its service area.
- Issue new ID cards to Medicare Advantage members in December. (**Your member ID number will not change.**)



Uniform Medical Plan will:

- Increase the lifetime limit for nutritional visits from 3 to 12.
- Remove Tier 3 from the Preferred Drug List and create an exception process for members who require drugs that are no longer covered.
- Add an annual \$4,000 prescription drug out-of-pocket maximum for families to comply with federal requirements. The individual prescription drug out-of-pocket maximum will remain \$2,000.
- Issue new HealthEquity debit cards in December 2019 to UMP CDHP members who enroll for 2020.
- Switch to HealthEquity's new phone number for UMP members: 1-844-351-6853.
- Offer 24/7 medical advice through Advice24 nurse line (UMP Plus–UW Medicine Accountable Network will continue to use its own nurse line).
- Change preauthorization requirements for some services. Visit hca.wa.gov/ump/pebb-open-enrollment to learn more.
- Make the following changes to the UMP Plus plans (available to non-Medicare subscribers only):
 - **UMP Plus—Puget Sound High Value Network will:**
 - Remove Spokane County from its service area.
 - Add these provider groups to the network: Rainier Health Network (which includes CHI Franciscan, City MD, Franciscan Medical Group, Northwest Physicians Network, The Doctors Clinic, Pediatrics Northwest, Highline Medical, and Primary Care Northwest) and The Polyclinic.
 - Remove these provider groups from its network: MultiCare, EvergreenHealth, Overlake Medical Center and Clinics.
 - **UMP Plus—UW Medicine Accountable Care Network will:**
 - Add Spokane County to its service area.
 - Remove Island Hospital and Overlake Medical Center and Clinics from its network.

Other changes coming in 2020

- The maximum annual contribution for health savings accounts will increase to \$3,550 for individuals (up from \$3,500 in 2019) and \$7,100 for families (up from \$7,000 in 2019). Subscribers ages 55 and older can continue to contribute an additional \$1,000 per year.
- If you are adding a new child (newborn, adopted child, or child whose total or partial support is your legal obligation in anticipation of adoption) to your PEBB insurance coverage, and doing so increases your monthly medical premium, the PEBB Program must receive your forms to add the child no later than 60 days after the event.

PEB Board policy resolutions

To see all changes to PEBB rules that take effect January 1, 2020, visit hca.wa.gov/pebb-rules.

- Effective January 1, 2020, to receive a SmartHealth financial wellness incentive in the following year, eligible subscribers must complete requirements by the following deadline:
 - For subscribers continuing enrollment in PEBB medical or enrolling in PEBB medical with an effective date in January through September 2020: November 30, 2020.
 - For subscribers enrolling in PEBB medical with an effective date in October through December 2020: December 31, 2020.
- If an employing agency provides incorrect information regarding PEBB Program benefits to the employee that they then relied upon, at a minimum the error will be corrected prospectively with enrollment in benefits effective the first day of the month after the date the error is identified. The Health Care Authority approves all error correction actions and determines if additional recourse, which may include retroactive enrollment, is warranted.