


MIAMIBEACH

## Frequently Asked Questions (FAQ)

### PLAN DESIGN

Carrier	
	
MEDICAL	YOU PAY
Deductible	\$0
Office Visit	\$0
Specialist	\$0
Diagnostic Procedure/Tests	\$0
Lab Services	\$0
Preventative Services	\$0
Therapy (Occupational/Physical/Speech)	\$0
Allergy Shots	\$0
Inpatient Services	\$0
Outpatient Services	\$0
Skilled Nursing Facility (Days 1-100)	\$0
Urgent Care	\$0
Emergency Care	\$0
Ambulance Services	\$0
Vision	\$0 Routine Eye Exam - 1 per year

	<p>Eyewear annual limit - \$0 up to maximum of \$150, for unlimited contact lenses (up to \$150 max), eye glass lenses (1 set per year), and/or eye glass frames (1 set per year).</p>
Hearing	<p>\$0 Routine Hearing Exam - 1 per year, \$0 fitting evaluation - 1 per hearing aid every 3 years. \$2,000 Hearing Aid Allowance - every 3 years</p>
Acupuncture	<p>\$300 Allowance per year for Acupuncture services.</p>
Additional plan benefits	<ul style="list-style-type: none"> <li>• Yearly health check-up</li> <li>• Wellness incentives</li> <li>• 24 Hour Health Information Lin</li> <li>• Retiree-focused clinical program</li> <li>• Silver&amp;Fit fitness</li> <li>• Caregiver support</li> <li>• Home Delivered Meals</li> <li>• Vision</li> <li>• Hearing</li> <li>• In-home support</li> </ul>

Carrier			
			
Prescription	30-day Retail You Pay up to	90-day Retail You Pay up to	90-day Mail Order You Pay up to
Annual Deductible \$0			
Pharmacy Out of Pocket Maximum \$2,000			
Tier 1 Generic	\$15	\$30	\$30
Tier 2 Preferred Brand	\$50	\$100	\$100
Tier 3 Non-Preferred Brand	\$75	\$150	\$150
Tier 4 Specialty	\$75	N/A	N/A

## MEDICAL QUESTIONS

### 1. What are Medicare Advantage plans?

Medicare Advantage plans are another way to get your Medicare Part A and Part B coverage plus additional benefits. Medicare Advantage plans are sometimes called Part C or MA plans. The Centers for Medicare & Medicaid Services (CMS) contracts with health insurers such as Cigna Healthcare to offer these comprehensive health insurance plans to Medicare-eligible enrollees. More than half of all Medicare beneficiaries are enrolled in Medicare Advantage plans in 2023.

## **2. What are the benefits of Medicare Advantage PPO plans from Cigna Healthcare?**

More coverage details are coming soon, but for now we want to provide you with initial information on the new plan highlights.

- Lower monthly premium compared to your current plan.
- Freedom to see any provider who accepts Medicare with the same cost share in or out of network.
- \$0 copay for all approved Medicare covered medical services.
- Medical and prescription drug coverage in one simple plan, with one ID card and one customer service phone number.
- Caregiver support – available to you and your family – includes coaching and resources for those caring for a loved one.
- Home Delivered Meals following inpatient hospital visits.
- \$0 copay for one routine eye exam per year. Eyewear annual limit - \$0 up to maximum of \$150, for unlimited contact lenses (up to \$150 max), eye glass lenses (1 set per year), and/or eye glass frames (1 set per year).
- One routine hearing exam per year is \$0 cost to you. \$0 fitting evaluation - 1 per aid every 3 years. \$2,000 hearing aid allowance - every 3 years
- \$300 Allowance per year for Acupuncture services.
- Silver&Fit healthy aging and exercise program includes a network of more than 18,000 fitness centers, home-based fitness programs, coaching, and much more, at no cost to you.
- Access to RetireeFirst Advocates for assistance with understanding and using your benefits.

## **3. Is there a Part A and/or Part B Deductible?**

No, there is no Part A or Part B deductible.

## **4. Is there Co-insurance or Copays?**

No, there is a \$0 copay for all Medicare-approved services.

## **5. Does this plan require referrals?**

No, this plan does not require referrals.

## **6. Does this plan require pre-certifications?**

Some services may require pre-certification.

## **7. Does this plan have a network?**

Yes, but you can go to any willing Medicare provider, hospital, or facility. This plan's in and out of network benefits are the same.

**8. Can I go to my current providers?**

Yes, you can see any provider that accepts Medicare and is willing to bill Cigna Healthcare.

**9. Do I still use my Medicare card?**

No, put your Medicare card in a safe place in case you need it at a later date. You will use only your Cigna Healthcare ID card for medical and prescription coverage.

**10. What if my provider says they do not accept this plan?**

If your provider accepts Medicare, the portion you are responsible for will remain the same whether they are considered in or out of network. Please call RetireeFirst at [305.204.8696 \(TTY 711\)](tel:305.204.8696) or toll free [855.460.6970 \(TTY 711\)](tel:855.460.6970) to assist; we can reach out to your provider to explain.

## PRESCRIPTION QUESTIONS

**11. Is there a prescription deductible?**

No, this plan does not have a prescription deductible.

**12. Is there Donut Hole (Coverage Gap) coverage?**

Yes, the prescription drug plan has full Donut Hole (Coverage Gap) coverage.

**13. Is there Catastrophic Coverage?**

Yes, the prescription drug plan has catastrophic coverage. The plan will pay the full cost of your drugs in the catastrophic coverage stage.

**14. Are my medications covered?**

Most likely yes – the formulary list is a comprehensive formulary just as before. If interested in enrollment, you will receive a formulary addendum and instructions to view the entire formulary with your Welcome Kit. Please call RetireeFirst at [305.204.8696 \(TTY 711\)](tel:305.204.8696) or toll free [855.460.6970 \(TTY 711\)](tel:855.460.6970) if you need you do not see your medication listed or need help looking up your medications.

**15. Can I go to the same retail pharmacy?**

Most likely, yes. There should be little to no pharmacy disruption. Cigna Healthcare has over 62,000 pharmacies in network. You do NOT need new prescriptions for retail pharmacy refills.

**16. Is there a mail order pharmacy? Is there a discount at mail order?**

There is mail order and a discount at mail order with Express Scripts Pharmacy, but you can also use most retail pharmacies for the same 90-day fill for only 2 retail 30-day copay prices. You DO need new prescriptions if you prefer to use the mail order service. You can use any network mail order service.

**17. Will my prescriptions transfer from the old plan?**

If you use the retail pharmacy, and have refills remaining, you do NOT need to obtain new prescriptions. If you use mail order, you WILL need to obtain new prescriptions from your provider if you change mail order services. This plan includes the network mail order pharmacy service Express Scripts Pharmacy through Cigna Healthcare.

**18. Do I need prior authorizations for certain prescription medicines?**

Some medications may require prior authorization. Please contact RetireeFirst at [305.204.8696 \(TTY 711\)](tel:305.204.8696) or toll free [855.460.6970 \(TTY 711\)](tel:855.460.6970) if you have questions or need assistance with prior authorizations as well as any other requirements such as step therapy, quantity limits, or formulary exceptions.

## ENROLLMENT QUESTIONS

**19. Can I stay on my current plan?**

Yes, you can remain on the current active plan but electing the Cigna True Choice PPO plan is encouraged as there are many plan improvements and a lower monthly premium compared to your current plan.

**20. What do I need to do to enroll? How can I request more information?**

To process your enrollment, you must complete and return the enclosed enrollment form. For your convenience, a pre-paid return envelope from RetireeFirst is included in this mailing. Please contact RetireeFirst at [305.204.8696 \(TTY 711\)](tel:305.204.8696) or toll free [855.460.6970 \(TTY 711\)](tel:855.460.6970) if you have any questions.

**21. When is the deadline to enroll?**

Please send in your completed application by December 5<sup>th</sup>, 2023.

**22. Can my Medicare eligible spouse join the plan?**

Yes, your Medicare eligible spouse can join the plan.

**23. Can I leave the Medicare Advantage plan and come back?**

Yes.

**24. If I remain on the City’s current benefits will this plan be available to me in the future?**

Yes, it may. However, if you leave the city’s plan entirely and choose to return, you will be responsible for the full cost of the premium without the City’s contribution.

**25. Once enrolled, when will I receive my ID card and Welcome Kit?**

If you choose to enroll in the Cigna True Choice PPO Medicare MAPD plan, ID Cards and Welcome Kits should be received in the middle to end of December. Retirees and Medicare eligible dependents will each receive their own card. These mailings will be separate, so keep an eye open for both your ID card and Welcome kit. Please note that each enrollee may not receive their plan information on the same day; this is normal.

**26. Once enrolled, what do I do if I lose my card?**

Please call RetireeFirst at **305.204.8696 (TTY 711)** or toll free **855.460.6970 (TTY 711)** and we will obtain a new one on your behalf, mail you a temporary card, and call your pharmacy and/or providers if needed.

**27. Once enrolled, who do I call if I need assistance with the plan?**

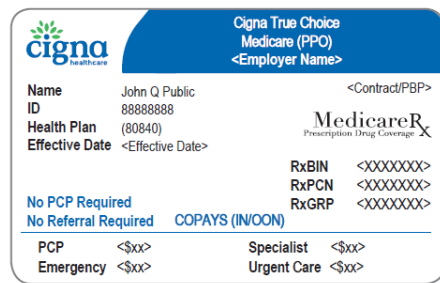
Please call RetireeFirst at **305.204.8696 (TTY 711)** or toll free **855.460.6970 (TTY 711)** to reach your dedicated City of Miami Beach Retiree Advocate team Monday-Friday from the hours of 8:00 to 5:00 EST.

**28. How much do I have to pay for the plan?**

The city can be reached at 305-673-7524 to answer any billing questions.

**Card Sample:**

**Front:**



**Back:**

