



Retiree**First**



Cupertino Union School District
Retiree Presentation



Agenda

- About RetireeFirst
- What Have You Received
- Mailings to Expect
- Plan Highlights
- Your ID cards
- How Does RetireeFirst Support You
- Questions and Answers

About RetireeFirst

Who We Are


RetireeFirst was founded in 2006 with a mission to simplify retiree healthcare for both plan sponsors and retirees.

How We Help

You have access to a team of Retiree Advocates who are US-based and available to help you navigate your retiree healthcare benefits and serve as a liaison between the insurance carrier, provider's office, and pharmacy.



What Have You Received?



Superintendent Stacy Yao
Board of Education Ava Chiao
 Sylvia Leung
 Jerry Liu
 Sathesh Madhathi
 Phyllis Vogel

Cupertino Union School District
 Office Address: 1030 S. Mary Avenue, Suite 100, Sunnyvale, CA 94087-3000 Telephone: (408) 252-3000
 Mailing Address: 10301 Vista Drive, Cupertino, CA 95014-2040

October 30, 2023

Dear Medicare Eligible Retiree and/or Spouse:

This letter is to provide you with more information about your **new medical plan** Alignment Health Plan Medicare Advantage with Prescription thru your **new carrier** Alignment Health Plan, RetireeFirst will be administering this plan on behalf of Cupertino Union School District.

If you are 65 years old or older, and currently enrolled in Anthem HMO, Anthem Deductible HMO, PPO Prudent Buyer, or TAGCO-Hartford, the District will automatically enroll you in the Alignment Health Plan Medicare Advantage with Prescription. This is a Medicare Advantage plan, you need to be enrolled in Medicare Part A & B, and you need to see providers who accept Medicare A & B. Your enrollment with Alignment Health Plan Medicare Advantage with Prescription will automatically cancel your enrollment in a different Medicare Advantage plan or a Medicare Prescription Drug (Part D). Enclosed is a benefits summary.


The monthly premium for this **new medical plan** is \$275.00 per member. The District will continue to bill you on a monthly basis. You should receive an invoice during the first week of each month unless you sent a payment in advance. If you do not receive an invoice, contact our office immediately. As a reminder, payment is due on the 15th of each month. You can pay for more than one month but you need to pay the exact amount for the months you want to pay in advance.

If you do not want to be enrolled under this new medical plan or if you want to cancel your medical coverage with the District before January 1, 2024, enclosed is a form that you will need to fill out. Mail the form to the following address no later than November 30, 2023. You can also email the form to noguera_aurora@cusdk8.org.

Cupertino Union School District
 10301 Vista Drive
 Cupertino, CA 95014
 Attn: Human Resources

In the next few days, you will be receiving correspondence directly from RetireeFirst and/or Alignment Health Plan. They will provide you with contact information as well as detailed plan information about your new medical and prescription coverage. Please feel free to contact them directly for questions about your medical coverage.

Should you need to contact our office about your retiree group benefits thru the District, you can call Aurora Noguera, Benefits Analyst, at 408-252-3000 extension 61212, or send her an email at noguera_aurora@cusdk8.org.

Sincerely,

 Mike Cellini
 Director, Human Resources

HR/an
 EQUAL OPPORTUNITY EMPLOYER

Cupertino USD Announcement Letter

Cupertino Union School District
Group Retiree Medicare Advantage with Prescription Drug (MAPD)

Plan: MAPD - Alignment - Cupertino USD - 2024 - 100% Plan
 Rate Period: 1/1/2024 - 12/31/2024

Medical Coverage	Member Pays
Medical Deductible	\$0
Medical Maximum Out-of-Pocket	N/A
Primary Care Visit	\$0
Specialist Visit	\$0
Inpatient Hospital Care	\$0 per admit -Unlimited Days
Outpatient Surgery	\$0
Inpatient Mental Health & Substance Abuse	\$0
Outpatient Mental Health & Substance Abuse	\$0
Skilled Nursing Facility	\$0, Days 1-100
Urgent Care Center	\$0
Emergency Room	\$0
Ambulance	\$0
Durable Medical Equipment	\$0
Ancillary Benefit Coverage	
Foreign Travel Coverage	\$0, Emergency Room & Urgently Needed Care -\$50,000 Limit per year
Hearing	\$0, Routine Hearing Exam - 1 per year \$1,000 Allowance - every 2 years
Chiropractic	\$0, 24 Visits per year - combined with Acupuncture
Acupuncture	\$0, 24 Visits per year - combined with Chiropractic
Podiatry	\$0, 12 Visits per year
Fitness Benefit	Included

Medical MAPD Stipulations

- National Passive Preferred Provider Organization Network: Plan is accepted wherever Medicare is accepted in all 50 states including U.S. Territories.

Cupertino USD 2024 Alignment Plan Design

Other Mailings to Expect

- Alignment Health Retiree Options (PPO) Pre-enrollment Kit
- Confirmation of Enrollment Letter
- Alignment Health Retiree Options (PPO) Welcome letter with Summary of Benefits and ID Card
- Please keep in mind each Retiree, spouse, and/or dependent may receive the above items on different days; this is normal.
- Additional information including your Evidence of Coverage and Drug Formulary can be found online.



Sample ID Cards

Alignment Health Plan **PPO**

ALIGNMENT HEALTH RETIREE OPTIONS (PPO)
A Medicare Health Plan with Prescription Drug Coverage

JOHN SMITH
Member ID: 0000000000
Plan Code: 801-002
RxGRP: H4961G
RxBIN: 610455
RxPCN: AHPPARTDG
RxID: 00000238603
Effective Date: 01/01/2023

In-Network	Out-of-Network
Office Visit: \$0	Office Visit: \$0
Specialist: \$0	Specialist: \$0
Emergency: \$0	Emergency: \$0

MedicareRx
Prescription Drug Coverage

Front

ALL CLAIMS MUST BE MAILED TO:
[Alignment Health Plan
P.O. Box 14010, Orange, CA 92863]

Member Services: 1-866-634-2247 (TTY 711)
Pharmacy Technical Help Desk: (844) 227-7615
Member Pharmacy Help: (844) 227-7616
Provider Services: (888) 517-2247

Medicare limiting charges apply. For more information on benefit cost shares please call member services or visit our website.

WWW.ALIGNMENTHEALTHPLAN.COM

Back

Medical Plan Design

Medical	Retiree Pays
Deductible	\$0
Office Visit: Primary Care	\$0
Office Visit: Specialist	\$0
Inpatient Hospital	\$0, Per Admission – Unlimited Days
Outpatient Care	\$0
Home Health Care	\$0
Skilled Nursing Facility	\$0, Days 1-100
Emergency Room	\$0
Urgent Care	\$0
Ambulance Service	\$0
Lab Services	\$0

Medical	Retiree Pays
Durable Medical Equipment	\$0
Radiology Services	\$0
Preventative Screenings	\$0
Chiropractic	\$0, 24 Visits per year, combined with Acupuncture
Acupuncture	\$0, 24 Visits per year, combined with Chiropractic
Podiatry	\$0, 12 Visits Per Year
Hearing	\$0, Routine Hearing Exam – 1 per year
World-wide Coverage (Foreign Travel)	\$0, Emergency Room & Urgently Needed Care - \$50,000 Limit per year
Fitness Benefit	FitOn

Medical Plan Highlights

- You must be enrolled in Medicare Part A and B to enroll in this Alignment MAPD plan.
- You will have ONE ID card for your medical and prescription services.
- You can use any willing Medicare provider, regardless if they are in the Alignment Network.

This Medicare Plan is made custom for Cupertino Union School District retirees. It is not comparable to what you may see on TV. These benefits are designed with the retiree in mind and are much richer than a basic Medicare plan.

Prescription Drug Plan Design

Prescription Plan Tiers	Retail 30 Day Supply You Pay Up To	Retail 90 Day Supply You Pay Up To	Mail Order 90 Day Supply You Pay Up To
Annual Deductible: \$0			
Tier 1-A Preferred Generic	\$5	\$10	\$10
Tier 1 Generic	\$5	\$10	\$10
Tier 2 Brand	\$25	\$50	\$50
Tier 3 Non-Preferred Brand	\$50	\$100	\$100
Tier 4 Specialty Drugs	\$50	N/A	N/A
Insulin Medications	\$35	\$70	\$70

Prescription Plan Highlights

- Full Donut Hole Coverage
- \$0 Catastrophic coverage phase
- You should continue to be able to use almost any retail pharmacy as Alignment includes over 60,000 in-network pharmacies, nationwide.
- You can obtain 90-day refills at the same copay as mail order
- \$60 per quarter for Over-the-Counter (OTC) items, does not rollover
- Alignment also offers a Mail Order Pharmacy called AllianceRx Walgreens for your convenience. If you would like to use the AllianceRx Walgreens Mail Order Pharmacy, you will need new prescriptions.
- You do not need new prescriptions for retail pharmacies. Simply show your new ID card and your refills will be processed under the Alignment Health Retiree Options (PPO).

Additional Benefits

Benefit	Details
Hearing	\$0, Routine Hearing Exam – 1 per year \$2,000 Allowance towards the cost of Hearing Aids – every 2 years (both ears combined)
Personal Emergency Response Services (PERS)	\$0 copay

How RetireeFirst Supports You

How can we help?

- Outreach to providers
- Medical prior authorizations
- Medical reimbursements
- Medical billing/Benefits questions
- Pharmacy outreach
- Mail order assistance
- Formulary lookup
- Prescription prior-authorization/step therapy
- Prescription billing/benefits questions

Some common questions

- “I received a bill, and I’m unsure if these services should be covered.”
- “I need help finding a specialist”
- “I need help making an appointment”
- “What does this benefit mean for me and how can I take advantage of it?”
- “I need to know if a specific drug my doctor prescribed is covered”
- “I’m at the pharmacy and my medication costs more than normal”



Retiree**First**

Questions and Answers



How much do I have to pay for the plan?

The cost of the plan for the 2024 plan year is \$275 per member per month.

Can I stay with the current plan?

No, all Medicare-eligible retirees and/or Medicare-eligible dependents must change over to this plan.

Do I still use my Medicare card?

No, put your Medicare card in a safe place in case you need it later. You will only use your Alignment ID Card for medical and prescriptions.

Can I Opt-Out of this plan?

We are required by law to give you the choice of opting out of the new plan. Since you are enrolled in the current medical and prescription drug plan it is unlikely that you would not be able to participate in this new robust plan. However, you have the option to opt-out and decline this medical and prescription coverage. Nevertheless, if you would like to opt-out, please call RetireeFirst at (408) 907-5678 (TTY 711) or toll free (833) 265-2657 (TTY 711), Monday-Friday, 8am-5pm PST.

What if my provider says they don't accept Medicare?

If your provider accepts Medicare, the portion you are responsible for will remain the same whether they are considered in or out of network. You can go to any willing Medicare provider, hospital, or facility. Please call RetireeFirst at (408) 907-5678 (TTY 711) or toll free (833) 265-2657 (TTY 711) to assist; we can reach out to your provider to explain.

Does this plan require pre-certifications?

Some services may require pre-certification.

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.

Do I need prior authorizations for certain prescription medications?

Some prescriptions may require prior authorization. Please contact RetireeFirst at (408) 907-5678 (TTY 711) or toll free (833) 265-2657 (TTY 711) if you have questions or need assistance with prior authorizations as well as any other requirements such as step therapy, quantity limit, or formulary exceptions.

What is the Donut Hole?

The coverage gap/donut hole begins after the total yearly prescription cost (including what our plan has paid and what you have paid) reaches a certain dollar amount. While most Medicare Part D plans have a gap/donut hole, you have full donut hole coverage with this plan. This means you will never pay more than the plan copays shown in the table above.

What is the Catastrophic Phase?

The catastrophic phase is a phase of coverage designed to protect you from having to pay very high out-of-pocket costs for prescription drugs. It is the final phase in your prescription drug plan and your copays will be \$0. You will remain in this phase for the rest of the plan year. You may have cost sharing for excluded prescriptions that are covered under this plan.



Retiree**First**

Thank you!

Cupertino Union School District Dedicated Retiree
Line:

408-907-5678 (TTY 711)

Toll free 833-265-2657 (TTY 711)

Monday-Friday, 8am-5pm PST

