

## 2. Retiree Medical Plan Options

### Overview

The 2018 Electric Boat Retiree Medical Plan underwritten by Hartford Life and Accident Insurance Company\* offers three (3) Retiree Medical plan options for Electric Boat retirees and spouses. All three plans allow you to reside and travel in every state throughout the country while maintaining the exact same level of coverage and the plans do NOT require that you stay within a network of participating providers or hospitals.



The Hartford has offered an extensive national portfolio of supplemental health insurance products in the Medicare market to more than 70,000 private and public sector retirees over 25 years. The Hartford has been providing insurance coverage to their customers for over 200 years.

Any of these three (3) retiree medical plan options can be chosen alongside either of the two (2) prescription drug plan options offered through the Electric Boat Retiree Medical and Prescription Drug Plan. The two (2) retiree prescription drug plan options which are available through Express Scripts are later described in *Section 3. “Retiree Prescription Plan Options.”*

### Eligibility

Electric Boat retirees, spouses and surviving spouses enrolled in both Medicare Part A and Part B are eligible for these programs. All three (3) retiree medical plans are available to you as long as you reside in the United States. Your coverage under the program you choose remains the same regardless of where you live or travel within the United States and its territories.

Retirees and spouses do not have to elect the same retiree medical plan option. Each member can choose the retiree medical plan that best fits their needs.

There are no pre-existing condition exclusions or limitations in any of these plans.

### Making changes to your retiree medical plan option

All members can elect to make a change to their retiree medical plan option once a year during open enrollment. Open enrollment begins on November 1<sup>st</sup> of each calendar year and members of the plan can elect to make a plan change for the following January 1<sup>st</sup>.

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### **2018 Electric Boat Retiree Medical Plan Option #1 The Hartford Group Retiree Insurance Plan High Option**

The Hartford Group Retiree Insurance Plan High Option, although not a Medicare Supplement plan, provides the benefits and coverages found in a Plan F. This is not an HMO, PPO or a Medicare Advantage Plan. You can visit all of your physicians without needing a referral. A doctor does not have to choose to participate with The Hartford. If a doctor or medical provider participates with Medicare, you will not have any out-of-pocket expenses or co-payments for Medicare covered services. Under this program, Medicare is the primary payer of your medical claims.

Most hospitals participate in the Medicare program. Veteran's Hospitals are unable to bill Medicare as services received at VA hospitals are covered through the Veterans Administration. Under this program, your providers will bill Medicare; Medicare will pay their portion of the claim and transmit the remainder of the claim to The Hartford. The Hartford will pay any deductibles or coinsurance that applies. As the secondary payer, The Hartford pays the balance of any Medicare approved amount to your provider. In this process, while some providers may actually bill The Hartford, most simply bill Medicare, await the payment from Medicare and then wait for the balance to come along from The Hartford. Providers should not be collecting any copayments or fees from you along the way unless it is for a service that is not covered by Medicare.

Most Medicare participating providers accept the Medicare fee schedule as payment in full. This means that those providers "accept Medicare assignment." Some Medicare participating providers do not accept the Medicare fee schedule as payment in full. These providers do not accept Medicare assignment. These providers are allowed to charge an additional fee of up to 15% above the Medicare allowed amount. This is considered the "excess charge." The High Option Plan covers the 15% excess charge providers that do not accept Medicare assignment are allowed to charge their Medicare patients. All Medicare covered services will be paid in full between Medicare and The Hartford Group Retiree Insurance Plan High Option.

If you travel or spend time away from home, your coverage will be the same wherever you go within the U.S. and U.S. territories. When you visit a doctor or hospital, you will show your red, white and blue Medicare card and your Hartford Group Retiree Insurance Plan member ID card. In general, all claims are processed electronically so the system is virtually paperless.

Since Medicare does not cover you outside of the U.S. and U.S. territories, The Hartford Group Retiree Insurance Plan High Option does provide you with some coverage while traveling abroad.

The Hartford Group Retiree Insurance Plan High Option also gives you access to the Silver&Fit® Fitness program. The Silver&Fit® program is offered through The Hartford by American Specialty Health. American Specialty Health is not affiliated with The Hartford and is not a provider of insurance services.



### **2018 Electric Boat Retiree Medical Plan Option #2 The Hartford Group Retiree Insurance Plan Base Option**

Under The Hartford Group Retiree Insurance Plan Base Option, Medicare is the primary payer of your medical claims. The plan follows the same guidelines as High Option Plan. Therefore, just like the High Option Plan, this plan allows you to visit any Medicare participating provider. You can visit all of your physicians without needing a referral. A doctor does not have to choose to participate with The Hartford.

As is the case with the High Option Plan, the Base Option Plan coordinates with Medicare; however, as a member under the Base Option Plan, in some cases, you will have some cost shares after Medicare pays your claims. By sharing in the cost, the result for you is a lower monthly plan premium.

The member cost shares required under this plan are outlined in the comparison chart that follows this section in your Benefits Guide.

Under the Base Option Plan, while Medicare will pay first, the plan requires that you pay a \$200 copay per hospital admission if your inpatient stay requires payment of the Part A deductible. Inpatient stays under Medicare guidelines require a Part A deductible upon admittance to the hospital. Under the Base Option Plan, you will be required to pay \$200 at any time that Medicare applies the Part A deductible to your claim.

Typically, if you are discharged from a hospital and readmitted within 60 days, a Part A deductible is not applied to your inpatient claim. If the Part A deductible is not applied to your claim, you will not have to pay another \$200 copay for your hospital stay.

The Hartford Group Retiree Insurance Plan Base Option will cover any coinsurance for skilled nursing care as long as Medicare pays the claim. Under this plan, you will have no cost share or copays for Medicare covered skilled nursing facility charges.

The Hartford Group Retiree Insurance Plan Base Option does cover the Medicare Part B deductible, however, under the Base Option Plan, you will be responsible for up to a \$20 copay for all office visits and a \$50 copay for visits to the emergency room. The plan will require up to a \$20 copay at any time a physician or provider bills Medicare for an office visit. You will not pay the full copay if the 20% balance, after Medicare pays the claim first, is less.

There are several Medicare covered services that would not typically include an office visit charge. Some examples would be lab, x-ray or other diagnostic testing, Medicare Part B drugs, durable medical equipment and supplies and ambulance charges.

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Your provider can tell you if an office visit will be charged to Medicare. If an office visit is not being charged, you will not have any out-of-pocket expense and the plan will pick up any balance of the claim after Medicare has paid.

The Base Option Plan does have an out-of-pocket maximum. The out-of-pocket maximum for the Base Option Plan is \$1,800. This out-of-pocket maximum is a limit to how much you can be charged during the calendar year for services received and covered under this plan. Once you meet the out-of-pocket maximum of \$1,800, you will no longer be responsible for any cost shares for any Medicare covered service for the rest of the calendar year.

Since Medicare does not cover you outside of the U.S. and U.S. territories, The Hartford Group Retiree Insurance Plan Base Option does provide you with some coverage while traveling abroad. Member cost shares incurred under the foreign travel benefit of this program do not count towards the out-of-pocket maximum.

The Hartford Group Retiree Insurance Plan Base Option also gives you access to the Silver&Fit® Fitness program. The Silver&Fit® program is offered through The Hartford by American Specialty Health. American Specialty Health is not affiliated with The Hartford and is not a provider of insurance services.

### **2018 Electric Boat Retiree Medical Plan Option #3**

#### **The Hartford Group Retiree Insurance Plan Low Option**

Under The Hartford Group Retiree Insurance Plan Low Option, Medicare is the primary payer of your medical claims. The plan follows the same guidelines as the High Option Plan and Base Option Plan. Therefore, this plan allows you to visit any Medicare participating provider. You can visit all of your physicians without needing a referral. A doctor does not have to choose to participate with The Hartford.

The Hartford Group Retiree Insurance Plan Low Option coordinates with Medicare but as a member under the Low Option Plan, in some cases, you will have some cost shares after Medicare pays your claims. By sharing in the cost, the result for you is a lower monthly plan premium.

The member cost shares required under this plan are outlined in the comparison chart that follows this section in your Benefits Guide.

Under the Low Option Plan, all of your Part A benefits are covered in full as long as Medicare pays the claim. Therefore, Medicare will pay primary on any inpatient stay or for any Medicare covered skilled nursing stay and the Low Option Plan will pay any of the cost shares required after Medicare pays. This plan will work identically to the High Option Plan where Part A services are concerned. You will have no out-of-pocket costs for these services under this plan.

Under the Low Option Plan, you are responsible for the Medicare Part B deductible. Once your Medicare Part B deductible is satisfied, Medicare pays most of your Part B covered services at 80% of the Medicare allowed amount. You will be responsible for the 20% balance after Medicare pays until such time your out-of-pocket costs reach \$1,000. Some services are covered at 100% by Medicare and for those you will not have any out-of-pocket expense.

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The out-of-pocket maximum for the Low Option Plan is \$1,000 and that includes your Part B deductible expense. Once you reach the \$1,000 out-of-pocket maximum, you will not be responsible for any cost related to Medicare Part B covered services for the rest of the calendar year. Again, for Medicare Part A expenses, the plan will pay the remaining balance of your claims after Medicare pays first. You will not be responsible for any costs related to Medicare Part A approved charges under the Low Option Plan.

Since Medicare does not cover you outside of the U.S. and U.S. territories, The Hartford Group Retiree Insurance Plan Low Option does provide you with some coverage while traveling abroad. Member cost shares incurred under the foreign travel benefit of this program do not count towards the out-of-pocket maximum.

The Hartford Group Retiree Insurance Plan Low Option also gives you access to the Silver&Fit® Fitness program. The Silver&Fit® program is offered through The Hartford by American Specialty Health. American Specialty Health is not affiliated with The Hartford and is not a provider of insurance services.

The comparison chart on the following pages illustrates the premium cost and benefit differences between the three (3) Retiree Medical Plan options offered through The Hartford in 2018.

\* Exclusions and limitations apply; please see your certificate for more details.

Group Retiree Health Form Series includes GBD-2400, GBD-2500, or state equivalent.

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