

## **Important Health Insurance Information for PERS Members Preparing to Retire**

### **Introduction**

The PERS Insurance Plans provide medical and dental insurance plan options as well as long term care insurance for PERS retirees. The insurance plans offer coverage for retirees, their spouses, and eligible dependents.

### **PERS Long Term Care Insurance**

Long term care is the type of care received either at home or in a facility when someone needs assistance with activities of daily living. Health insurance does not pay for the cost of long term care.

The PERS long term care insurance carrier is UNUM Life Insurance Company of America. All eligible PERS retirees, spouses, and dependents may apply for long term care insurance by contacting UNUM at 800-227-4165 for enrollment and eligibility information.

You, your spouse, and eligible dependents may enroll in the PERS-sponsored Long Term Care Plan if you are a retired member of PERS. PERS long term care insurance is offered to retirees in a different fashion than PERS health insurance plans. Retirees deal directly with the insurer for enrollment, premium payments, claims and all other aspects of the plans.

Although the option to purchase long term care insurance is available to all PERS retirees and eligible dependents, some individuals may be denied coverage because of poor health. Premium rates vary with the individual's age. The lower an individual's age when the long term care plan is purchased, the lower the premium will be. Therefore, if you are interested in purchasing long term care insurance, it is generally more affordable if you purchase your plan as soon as you are eligible to enroll. For additional information, call UNUM at 800-227-4165. Or, you may access the UNUM Web site at <http://w3.unumprovident.com/enroll/PERS>

### **PERS Retiree Health Insurance Program**

The PERS Retiree Health Insurance Program offers health insurance coverage for all retirees, their spouses and dependents. If you are not yet Medicare-eligible, the PERS health plans may not be your best options for health insurance coverage. Make sure you inquire about your employer's health plan options for non-Medicare-eligible retirees. Your retiree plans often have better benefits and premiums for retirees who are not Medicare-eligible.

### **Health Plan Information**

PERS offers four health plans. Each plan offers Medicare and non-Medicare coverage to PERS members and their families.

*ODS Health Plan* is an indemnity, fee-for-service insurance plan. You may live anywhere in the United States and still maintain your ODS Health Plans coverage. For information about coverage outside

the United States, call ODS Health Plan at 800-962-1533.

*Kaiser Permanente* is a manager care organization offering coverage to PERS members who live within 30 miles of any Kaiser Permanente facility.

*Providence Health Plan* is a managed care plan offering coverage to members throughout the Willamette Valley from Portland to Eugene.

*Clear Choice Health Plans* is a provider-sponsored organization offering managed care plans to members living in Central Oregon and along the central Columbia George.

For complete information regarding the serviced areas for any of these health plans, call the PERS Health Retiree Insurance Program at 800-768-7377. Or, you may access the PERS Retiree Insurance Program Web site at [www.pershealth.com](http://www.pershealth.com)

Health plan contracts and rates are negotiated and renewed annually.

**Dental Coverage**

PERS offers a dental insurance program. You may enroll in the PERS dental plan if you are enrolling in a PERS-sponsored health insurance plan.

**Survivor Continuation of Coverage**

Survivors and dependents of deceased retirees are eligible to continue their health plan through PERS as survivors of the PERS retired member. Application for this coverage must be submitted within 60 days of the death of the insured. Dependents must meet all eligibility requirements.

**Health Insurance Program Enrollment Opportunities**

Enrollment opportunities for the PERS plans are listed below. **Be certain you understand these enrollment opportunities, as these are the only enrollment opportunities offered for the PERS health plans.** Retirees and spouses or dependents who do not choose to enroll in a PERS health plan during one of these enrollment periods will lose their opportunity to enroll into the PERS Health Insurance Program.

*New Retirees*

New retirees may enroll up to 90 days after the date of their retirement date. Coverage will be effective on your retirement date if you apply before your retirement date, or on the first day of the month after your application is received if you apply after your retirement date.

*Medicare Eligibility*

PERS retirees may enroll up to 90 days after the date of their initial Medicare eligibility if they are enrolled in both Medicare parts A and B. Coverage will be effective on the date that your Medicare coverage becomes effective if you enroll before the date of the Medicare eligibility. Coverage will be effective on the first day of the month after your application is received if you apply after the date of your Medicare eligibility.

*Continuous  
Group Coverage*

PERS retirees may enroll at any time if they have been covered under another group health plan for 24 consecutive months immediately preceding enrollment in a PERS health plan. Coverage will be effective on the date that your other coverage ends. (Preceding coverage must be with an employer-sponsored health plan. For example, if you are on Medicare A and B and are enrolled in AARP, this does not qualify as a group plan.). If you have any questions regarding your group insurance, please call the PERS Health Insurance Program at the telephone numbers listed on the back of this brochure.

*Dependent  
Enrollment*

Dependents may be enrolled at any of the enrollment periods available to retirees, including the retiree's date of retirement, the dependent's eligibility for Medicare, or after the dependent has had at least 24 consecutive months of coverage under another group health plan. New dependents may also be enrolled within 30 days of becoming dependents.

Dependents must be enrolled in the same plan as the retiree. If the retiree has Medicare coverage and the dependent has non-Medicare coverage, their coverage must still be with the same health plan.

**Subsidy for  
State of Oregon  
Retirees**

**RHIA:**

The Oregon Legislature has directed PERS to establish a Retirement Health Insurance Account (RHIA) to help pay the Medicare companion health insurance premiums of eligible retirees. A monthly contribution, up to \$60 per retiree, is applied to PERS-sponsored Medicare companion insurance costs. Premium payments exceeding that amount can be deducted from your monthly benefit checks.

You are eligible to receive a PERS RHIA contribution if you:

- are enrolled in a PERS-sponsored health plan; and
- are enrolled in both Medicare Part A (hospital insurance) and Part B (medical insurance); and
- had a minimum of eight years of PERS-qualifying service when you retired (or the equivalent of eight years if you receive a disability benefit); and
- are receiving a retirement benefit from PERS.

**RHIPA:**

Members who are retired from the state of Oregon and are not eligible for Medicare may be eligible for another subsidy. ORS 238.415 establishes a Retiree Health Insurance Premium Account (RHIPA) fund to help pay the monthly health insurance premiums for certain state retirees.

**Costs of PERS  
Health Plans**

Health insurance premium rates are available on a separate information sheet. The rates are contracted for annually and change January 1 of each year. You may view these rates on the PERS Retiree Insurance program Web site at [www.pershealth.com](http://www.pershealth.com)

There are different rate combinations depending on your and your dependents' Medicare eligibility and your eligibility for subsidy contributions, if any. The information concerning eligibility for the subsidies is explained on the back of the rate sheets. If you wish additional information about rates and benefits, contact the PERS Health Insurance Program at 503-224-7377 or 800-768-7377.

**How to Make  
Your Health  
Insurance  
Premium  
Payment**

Your monthly premium can be paid by (1) automatic deduction from your PERS pension, (2) automatic withdrawal from your checking account, or (3) a check to the PERS Health Insurance Program.

**PERS Health Insurance Program**

P O Box 40187  
Portland, OR 97240-0187  
503 224-7377 Portland  
800 768-7377 outside Portland  
TTY 800 433-6313  
[www.pershealth.com](http://www.pershealth.com)

**PERS**

P O Box 23700  
Tigard, OR 97281-3700  
503-598-7377 Portland  
888-320-7377 outside Portland

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