

# RETIREMENT BENEFITS, ELIGIBILITY STANDARDS AND CONTRIBUTION PERCENTAGES FOR HEALTH AND DENTAL INSURANCE

CURRENT PLANS	ELIGIBILITY
<b>POS</b> BCBS BLUE CHOICE PENSION GROUP	<p>Retiree/spouse, or surviving spouse, who are under age 65 and their dependents.            Retiree/spouse, or surviving spouse, who are over age 65, but are not Medicare eligible.</p> <p>Medicare eligible retiree who must maintain a family health plan for more than one (1) dependent per MGL Chapter 32B Section 18A.</p> <p>This plan's service area includes all cities and towns in the Commonwealth of MA.</p>
<b>PPO</b> BCBS BLUE CARE ELECT PENSION GROUP	<p>Retiree/spouse, or surviving spouse, who are under age 65 and their dependents.            Retiree/spouse, or surviving spouse, who are over age 65, but are not Medicare eligible.</p> <p>Medicare eligible retiree who must maintain a family health plan for more than one (1) dependent per MGL Chapter 32B Section 18A.</p> <p>Benefits not limited to Massachusetts service area.</p>
<b>HMO/HDHP</b> BCBS ACCESS BLUE NEW ENGLAND SAVER PENSION GROUP with Health Savings Account	<p>Retiree/spouse, or surviving spouse, who are under age 65 and their dependents.            Retirees/spouse, or surviving spouse, who are over age 65, but are not Medicare eligible.</p> <p>Medicare eligible retiree who must maintain a family health plan for more than one (1) dependent per MGL Chapter 32B Section 18A.</p> <p>This plan's service area includes all cities and towns in the Commonwealth of MA, State of Rhode Island, State of Vermont, State of Connecticut, State of New Hampshire, and State of Maine</p>
<b>SUPPLEMENT TO MEDICARE</b> BCBS MEDEX 2 with Medicare Parts A & B	<p>Retiree/spouse, or surviving spouse, 65 Years of Age and Medicare Eligible</p> <p>Retire/spouse, or surviving spouse, who are under age 65 with Medicare Parts A &amp; B due to a Social Security disability.</p> <p>Benefits not limited to Massachusetts service area.</p>
<b>SUPPLEMENT TO MEDICARE</b> BCBS MANAGED BLUE FOR SENIORS with Medicare Parts A & B	<p>Retiree/spouse, or surviving spouse, 65 Years of Age and Medicare Eligible</p> <p>Retire/spouse, or surviving spouse, who are under age 65 with Medicare Parts A &amp; B due to a Social Security disability.</p> <p>Must reside in Massachusetts, benefits are limited to the Massachusetts service area.</p>

# RETIREMENT BENEFITS, ELIGIBILITY STANDARDS AND CONTRIBUTION PERCENTAGES FOR HEALTH AND DENTAL INSURANCE

CURRENT PLANS	ELIGIBILITY
<b>PDP</b> BLUE MEDICARE Rx for Medicare Supplement Plans	<p>Retiree/spouse, or surviving spouse, 65 years of age and Medicare Eligible</p> <p>Retiree/spouse, or surviving spouse, who are under age 65 with Medicare Parts A &amp; B due to a Social Security Disability</p> <p>Retirees enrolled in a Medicare Supplement Plan will be automatically enrolled in the Blue Medicare Rx plan.</p>
BCBS DENTAL BLUE FREEDOM	<p>Retirees under age 65, or over age 65 and not Medicare eligible, his/her spouse, surviving spouse, and dependents who are enrolled in Blue Choice. Retirees enrolled in Blue Care Elect are not eligible for dental insurance.</p> <p>Retiree/spouse, or surviving spouse, who reach age 65, who are enrolled in Medicare Parts A &amp; B, or who are under age 65 with Medicare Parts A &amp; B due to a Social Security disability, are eligible for individual dental coverage.</p> <p>Retirees not enrolled under any Town health plan.</p> <p>Retirees with a spouse employed or retired from the Town/School and one spouse carries the health insurance for both, either under a family plan or two individual plans, then the other spouse may pick up an individual, individual+1 or family dental plan.</p>

For employees who retired from the Town of Plymouth prior to February 1, 2021: In order to be eligible for insurance as a Town of Plymouth retiree, the individual would have had to be eligible for Town of Plymouth insurance as an active Town of Plymouth employee.

Effective February 1, 2021, in order to be eligible for health and/or dental insurance upon retirement, the retiree must be in active participation in the plan and must be on the health and/or dental insurance plan on the date that s/he retires from the Town of Plymouth. Those individuals who are not actively participating in a Town health plan or are in inactive status and retire at a date later than his/her separation will no longer be eligible for health and/or dental insurance upon retirement.

Members of the Plymouth Police Brotherhood will be excluded from the above language for the duration of the PEC agreement ending on June 30, 2029.

If a retiree elects to discontinue insurance coverage, they will not be eligible to re-enroll in the future.

# **RETIREMENT BENEFITS, ELIGIBILITY STANDARDS AND CONTRIBUTION PERCENTAGES FOR HEALTH AND DENTAL INSURANCE**

## **Health and Dental Insurance Contribution Percentages:**

	<u>Health</u>	<u>Dental</u>
Retired prior to July 1, 1994	1%	1%
Retired after July 1, 1994	10%	10%
Hired on or after July 1, 2003, but prior to July 1, 2016	20%	20%
Hired on or after July 1, 2016, but prior to June 30, 2018	22.5%	20%
Hired on or after June 30, 2018	25%	20%
Hired on or after July 1, 2021	25%	25%
Hired on or after July 1, 2024	30%	30%

**For additional information on contribution percentage eligibility upon retirement, please refer to Chapter 27 of the Acts of 2003 (Home Rule Petition).**

# **RETIREMENT BENEFITS, ELIGIBILITY STANDARDS AND CONTRIBUTION PERCENTAGES FOR HEALTH AND DENTAL INSURANCE**

## **When a retiree or a spouse turns age 65 or becomes Medicare eligible due to a Social Security disability:**

Per M.G.L. Chapter 32B, Section 18A, all retirees, their spouses, a surviving spouse or dependent, are required to enroll in Medicare Parts A and B, if eligible, in order to receive supplemental health insurance through the Town of Plymouth.

Approximately three months prior to reaching age 65, the individual should contact the Social Security Administration and notify them of the date they will be 65. Social Security will determine Medicare eligibility. If the individual is eligible, Social Security will issue a Medicare card that includes both Parts A and B.

Medicare eligible retirees shall provide the Town proof of Medicare enrollment and will be required to enroll in one of the Town's Medicare supplement plans. If a retiree does not submit the required documentation, the retiree's health insurance will be subject to termination.

If a Medicare eligible retiree/spouse is covering more than 1 non-Medicare eligible dependent (dependents include spouses and children) the retiree/spouse would remain on a family plan and not be required to enroll in a Medicare supplement plan. When there is no longer more than 1 non-Medicare eligible dependent covered on the family plan, (for example, spouse also becomes Medicare eligible, child ages off plan, etc.) the retiree/spouse would then be required to enroll in a Medicare supplement plan at that time.

If the individual is not eligible for Medicare, Social Security will issue a Statement of Ineligibility. The individual must provide a copy of this Statement of Ineligibility to the Town of Plymouth in order to remain insured on their current, non-Medicare insurance plan.

Medicare Part A provides hospital coverage and does not carry a payment cost to the enrollee.

Medicare Part B provides physician and extended services and has a payment cost. This payment is subject to an increase in January of each year as determined by the Social Security Administration. Retirees/spouses are responsible for paying their Part B premium to Medicare. An individual who enrolled in Medicare prior to or effective 7/1/03 will not be impacted by any Medicare penalty incurred as a result of enrolling in Medicare late, as these costs will be reimbursed to each insured by the Town.

Once an individual enrolls in Medicare, Medicare becomes the primary payer.

Supplemental plans are designed as secondary to your Medicare coverage. Individuals will need to review the difference in benefits for these supplemental plans which can be found on the Benefit Comparison sheets and Summary of Benefits documents provided by the Human Resource Department as well as located on the Town's website.

As benefits may change over time, it is critical that the eligible individual should consult with the Human Resources Department at this time so that options, coverage, and costs can be explained before making a decision. The Town Human Resources Department can be reached at (508) 747-1620 x10101 and the School Human Resources Department can be reached at (508) 224-5061.

Retirees are also encouraged to stay in contact with the Human Resources Department and remain informed regarding all benefits.

# RETIREMENT BENEFITS, ELIGIBILITY STANDARDS AND CONTRIBUTION PERCENTAGES FOR HEALTH AND DENTAL INSURANCE

## Medicare Part B Reimbursement

For those eligible and receiving the Medicare Part B reimbursement, the Town of Plymouth reimburses a portion of the Standard Medicare Part B Premium (excluding related monthly adjustment amount (IRMAA)) as established by the Federal Social Security Administration as negotiated between the Town of Plymouth and the Public Employee Committee (PEC) and unanimously recommended by the Insurance Advisory Committee (IAC) to Town Management and approved by the ~~Board of Selectmen~~ Select Board.

The schedule of payments for those receiving a Medicare Part B reimbursement is as follows:

<u>Quarter</u>	<u>Month Paid*</u>
January, February, March	March
April, May, June	June
July, August, September	September
October, November, December	December

\*Payment is issued on the last business day of the month

Retirees who become Medicare eligible after July 1, 2023, will not be eligible for a Medicare Part B reimbursement.

Employees who apply and are approved for retirement with the Town after July 1, 2022, will not be eligible for a Medicare Part B reimbursement.