

PERACare Information Meeting Under Age 65 2024



October 2023





Agenda

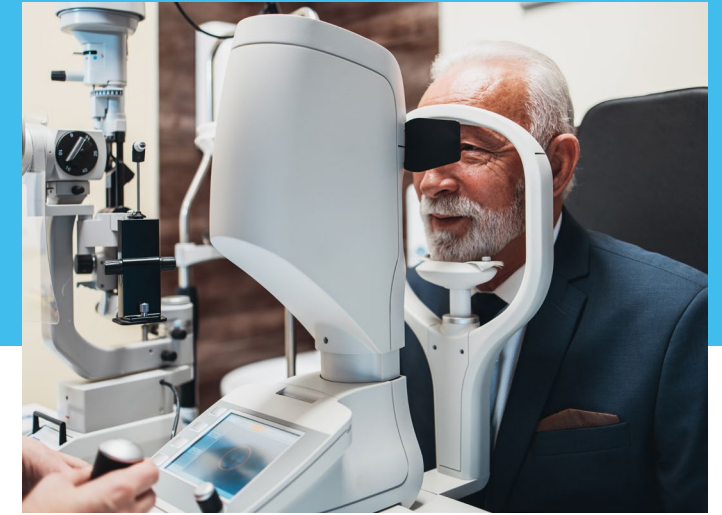
- PERACare Eligibility
- Enrollment Opportunities
- Pre-Medicare Health Plans
- Dental and Vision Plans



Health Plans



Dental Plans



Vision Plans

Coverage for benefit recipient and:

- Spouse or civil union partner
- Dependent children under 26
- Disabled adult children

With some restrictions, coverage may continue for a surviving spouse or partner after the benefit recipient's death

Opportunities to Enroll in PERACare

Enrollments must be received no later than 30 days following the enrollment event



Retiring or involuntary loss of coverage



Turning 65



Annual Opportunity to Enroll or Change Coverage

- **Typically in October**
- **January 1 effective date**

You may cancel coverage for yourself and/or any dependent with 30-days advance written notice

Health



Which booklet is right for you?



For enrollees under age 65



For enrollees age 65+ and on Medicare, or under age 65 and on Medicare due to specific medical conditions



For families with enrollees under age 65 (Pre-Medicare) and enrollees on Medicare



Combination Coverage



Pre-Medicare

+

Medicare



Choosing a Plan

- Service area
- Monthly premium
- Plan deductibles
- Out-of-pocket costs and maximums
- Prescription drug coverage



Best plan for you



PERACare Premium Subsidy: Under 65



**\$11.50 per year of
PERA service credit**

**Maximum: \$230 per
month with 20+ years
of service credit**

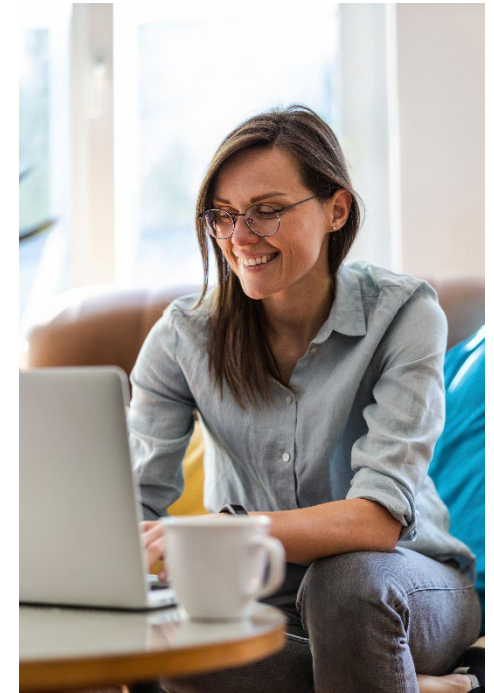
How to Reduce Your Out-of-Pocket Costs



See your Primary Care Physician regularly and get preventive care



Use generic drugs when possible



Review your current coverage and make adjustments



Connect for Health Colorado

- Shop around to find the plan that works best for you
- <https://connectforhealthco.com/>





Urgent Care

Lower cost
than
emergency
room

Avoid
emergency
rooms when
issue is
not life-
threatening

Stand-alone
emergency
rooms are
NOT
urgent care
facilities

Know your
nearest
urgent care
facility



Pre-Medicare



A UnitedHealthcare Company



KAISER PERMANENTE®

UMR

Available Nationwide





The PPO #1 and #2 plans use the nationwide Choice Plus provider network and the same broad list of covered medications (formulary)



ALL hospitals in Colorado are in Choice Plus network

Find a provider near you

<https://connect.werally.com/medicalProvider/root>



PPO #1

Primary Care Office Visit Copay

Premium Care Physician: \$0

Non-Premium Care Physician: \$40

Urgent Care Copay

\$75

Deductible*

\$3,500

Annual Out-of-Pocket Maximum*

\$10,000

Premium*

**\$1,446 per month or \$1,216 per month
with \$230 PERA subsidy**

** Costs are for an individual*

PPO #1 Prescription Drugs

Administered by
Optum Rx

	Retail Pharmacy 31-day supply	Mail Service 90-day supply
Generic	\$10	\$20
Preferred Brand	\$75	\$150
Non-Preferred Brand	\$100	\$200
Specialty	N/A	\$125 (31-day supply)



PPO #2

Primary Care Office Visit Copay

Premium Care Physician: \$0

Non-Premium Care Physician: \$40

Urgent Care Copay

\$75

Deductible*

\$6,000

Annual Out-of-Pocket Maximum*

\$16,000

Premium*

**\$846 per month or \$616 per month with
\$230 PERA subsidy**

** Costs are for an individual*

PPO #2 Prescription Drugs

Administered by
Optum Rx

	Retail Pharmacy 30-day supply	Mail Service 90-day supply
Generic	\$20	\$40
Preferred Brand	\$100	\$200
Non-Preferred Brand	\$125	\$250
Specialty	N/A	\$150 (31-day supply)



UMR

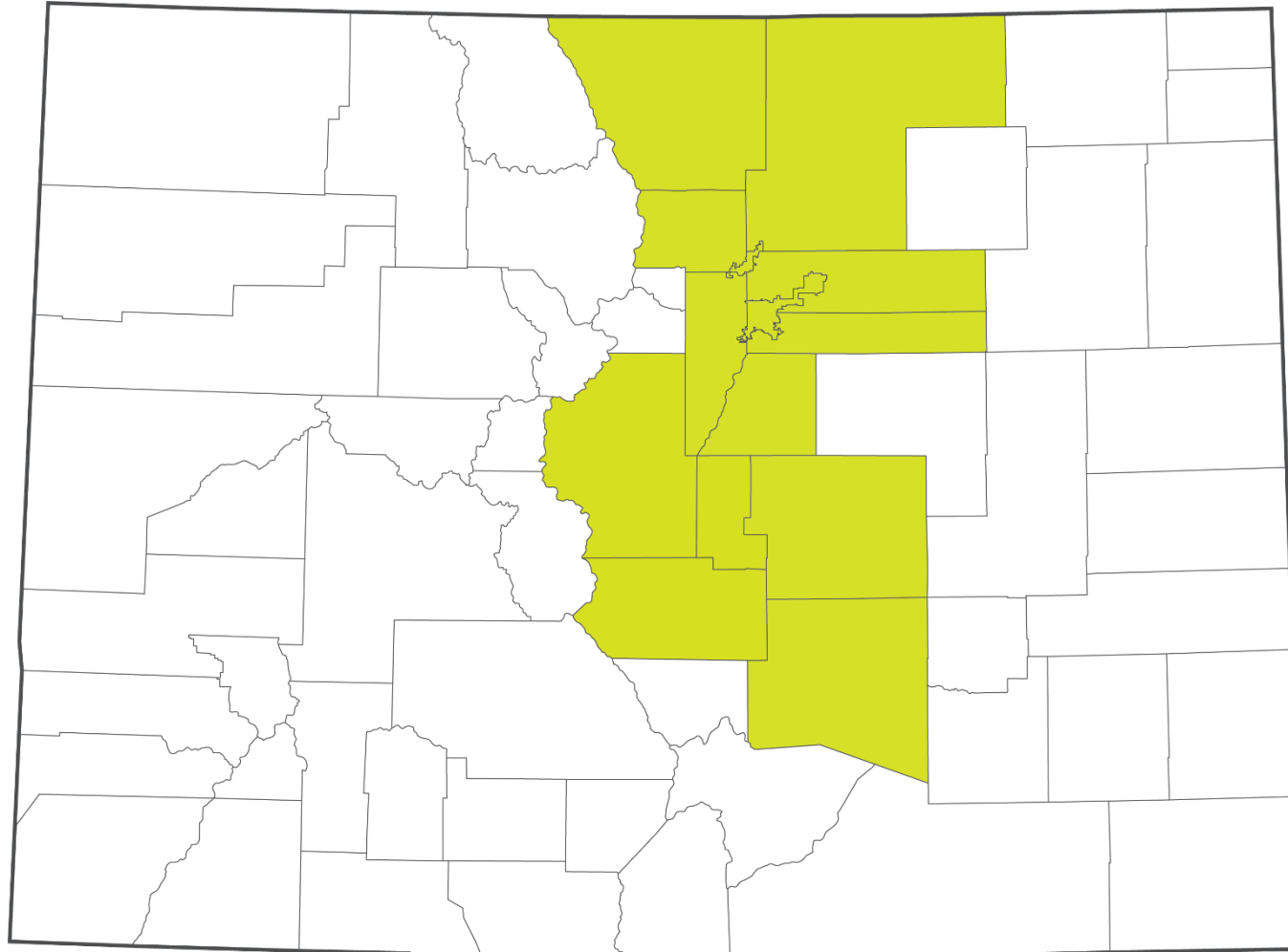
Additional Benefits

- Specialist Management Solutions (SMS)
- Real Appeal
- One Pass Fitness
- Talkspace
- UnitedHealthcare Hearing
- Virta Health

Kaiser Permanente



Service Area



Away From
Home Travel Line:
951-268-3900



- » Must use doctors and facilities in Kaiser's network
- » When traveling, able to see doctors outside of the Colorado network that are in the Kaiser Permanente network
- » Emergency and urgent care are covered while out of service area at in-network level
- » Away From Home Travel Line:
951-268-3900



Everyday Care Plan (EDCP)

Primary Care Office Visit Copay
No charge

Urgent Care
No charge

Deductible*
\$4,000

Out-of-Pocket Maximum*
\$4,000

Premium*
\$1,428 per month or \$1,198 per month
with \$230 PERA subsidy

** Costs are for an individual*

Everyday Care Plan (EDCP)

	Retail Pharmacy 30-day supply	Mail Service 90-day supply
Preferred Generic	\$0	\$0
Preferred Brand	\$50	\$100
Non-Preferred	\$125	\$250
Specialty	\$300	N/A



HDHP

Deductible*

\$5,000

All prescriptions and services, except preventive care, are subject to the deductible

Out-of-Pocket Maximum*

\$7,500

HSA-Eligible: 2024 contribution limit for single coverage

\$4,150

Premium*

\$877 per month or \$647 per month with \$230 PERA subsidy

* Costs are for an individual

HDHP

Prescription costs listed apply only after plan deductible has been met

	Retail Pharmacy 30-day supply	Mail Service 90-day supply
Preferred Generic	\$10	\$20
Preferred Brand	\$30	\$60
Non-Preferred	\$50	\$100
Specialty	20% coinsurance (\$100 max)	N/A



Additional Kaiser Benefits

- Away from Home Travel Line
- SilverSneakers
- Mindfulness Apps
- Community Resource Directory
- Nurseline

 DELTA DENTAL[®]

 Cigna[®]

Dental





Delta Dental PPO

- DPPO Network
- Nationwide networks of dentists
- Visit in- or out-of-network providers
- \$2,000 annual benefit maximum

Monthly Premium \$43.26



Cigna Dental HMO

No annual benefit maximum

Must use provider in the Cigna Dental Care
Access network

Monthly Premium **\$21.23**



Vision





PPO #1

Lenses **and** frames
or contacts
**covered once per
calendar year**

Easy options
upgrade available

Monthly Premium
\$9.70

PPO #2

Lenses **or** contacts
**covered once per
calendar year**

Frames
**covered once every
other calendar year**

Monthly Premium
\$5.78

PPO #3

Discounts
on glasses or contacts

Monthly Premium
\$0.91

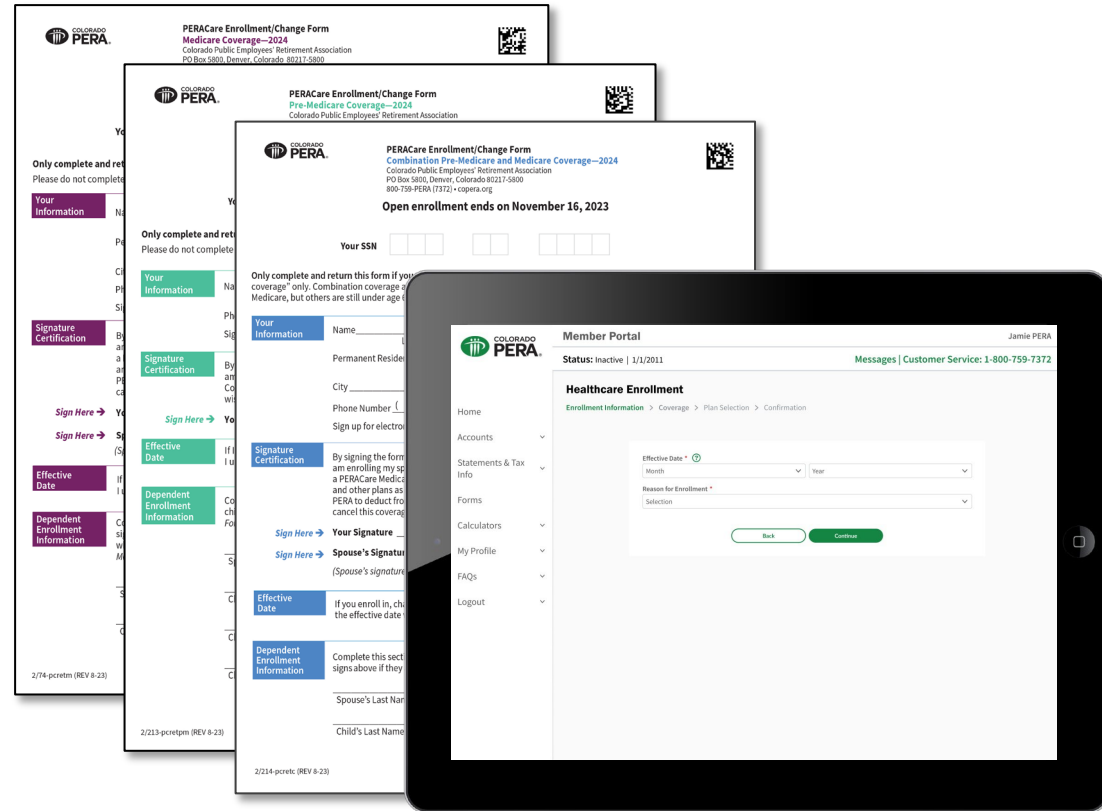


TruHearing

Savings on hearing aids and batteries

Call **1-866-929-3827**
for more information

Submit All New Enrollments to PERA



Online | Mail

Enrollments may be submitted up to 90 days prior to effective date

Meeting Feedback





More Information

- PERACare Booklets
- PERA Customer Service
 - 1-800-759-7372
- copera.org
 - With links to carrier websites