

Retiree Health Benefits Newsletter

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The **2013 Health Fair** is scheduled for:

- Tuesday, November 5th from 7:00 am to 11:00 am at the 9th and Wells, Administration Complex – Health Department Auditoriums
- Thursday, November 7th from 7:30 am to 10:30 am at the Mills B Lane Justice Center, 1 S. Sierra Street, 3rd floor, DA Training Room

The New Health Insurance Marketplace

The Health Insurance Marketplace that starts in 2014 is designed to help people who do not have any health coverage. If you have health coverage through Washoe County, your previous employer and/or with Medicare, the Marketplace won't have any effect on your Medicare or employer health coverage.

The Marketplace provides new health coverage options for many Americans. If you have family and friends who don't have health coverage, tell them to visit HealthCare.gov <https://www.healthcare.gov/> to learn about their options.

MEDICARE OPEN ENROLLMENT IS NEARLY HERE

When you are first eligible for Medicare, you have a 7-month Initial Enrollment Period to sign up for Part A and B. If you didn't sign up for Part A and B when you were first eligible you can sign up during the General Enrollment Period between January 1 and March 31 each year. Your coverage will start July 1. You may pay a higher premium for late enrollment.

Medicare Open Enrollment (October 15 – December 7) is the time when all people with current Medicare coverage are encouraged to review their current health and prescription drug coverage, including any changes in costs, coverage and benefits that will take effect the next year. This may apply to your spouse if he/she has a plan through Medicare.

If you are on the Medicare Advantage Plan offered by Washoe County this does not apply to you. If you are not on the Washoe County Medicare Advantage Plan and turn 65 soon please contact us for more information (775-328-2079). We are planning to add a second Medicare Plan option in the next fiscal year so more on that next spring!

HOMETOWN HEALTH CHANGING PHARMACY PROVIDER NOVEMBER 1

MedImpact is the new prescription program provider for both retail and mail order effective November 1st for all **Hometown Health** participants. Member letters with specific detail have been sent regarding this change and new ID cards will be provided.

MedImpact is the nation's largest independent privately-owned Prescription Benefit Manager, servicing 27 million nationwide, with a network of 64,000 pharmacies, including major chains and independent pharmacies.

Senior Care Plus plan (Medicare) participants please note you will not move to the new prescription provider MedImpact until January 1, 2014.





TruHearing Hearing Aid Discount Program

Like vision loss, hearing loss can have a huge impact on workplace productivity and overall quality of life. In fact, the largest hearing impaired group in the United States is comprised of those under the age of 65 - many of who are still in the workforce leading active lives.

All health plan eligible employees have vision services provided by Vision Service Plan (VSP). TruHearing is making hearing aids affordable for all VSP members by providing free enrollment (\$108 value) in the TruHearing MemberPlus Program. Members can add their covered dependents and other family members to enjoy the same great savings.

For more information go to vsp.truhearing.com or call TruHearing at 877-396-7194. Contact HR Benefits if you want to receive an informational flyer.

DID YOU KNOW?

30 Million Americans need hearing aids
And yet, 70% don't have hearing aids because they can't afford them.



New PPO Pharmacy Benefit Providers

We are pleased to announce that we will have a new prescription drug program provider for the self-funded PPO effective January 1, 2014. CVS-Caremark is replacing our current provider, Catamaran.

The current contract expires at the end of the year and through an extensive Request for Proposal (RFP) process facilitated through our membership with the Nevada Business Group on Health we selected the new provider of our Pharmacy Benefit Management services. Other public sector and private sector employers in the coalition voted unanimously to select CVS-Caremark based on improved services and on projected cost savings per employer of 13-15%.

Employee and retiree communication on the prescription drug provider change will be sent soon regarding the January 1st transition. We hope to keep the disruption to a minimum and CVS-Caremark will provide you more information on enhanced services in coming months. Please do not discard any mail coming to you from CVS Caremark if you are in the self-funded PPO health plan.



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